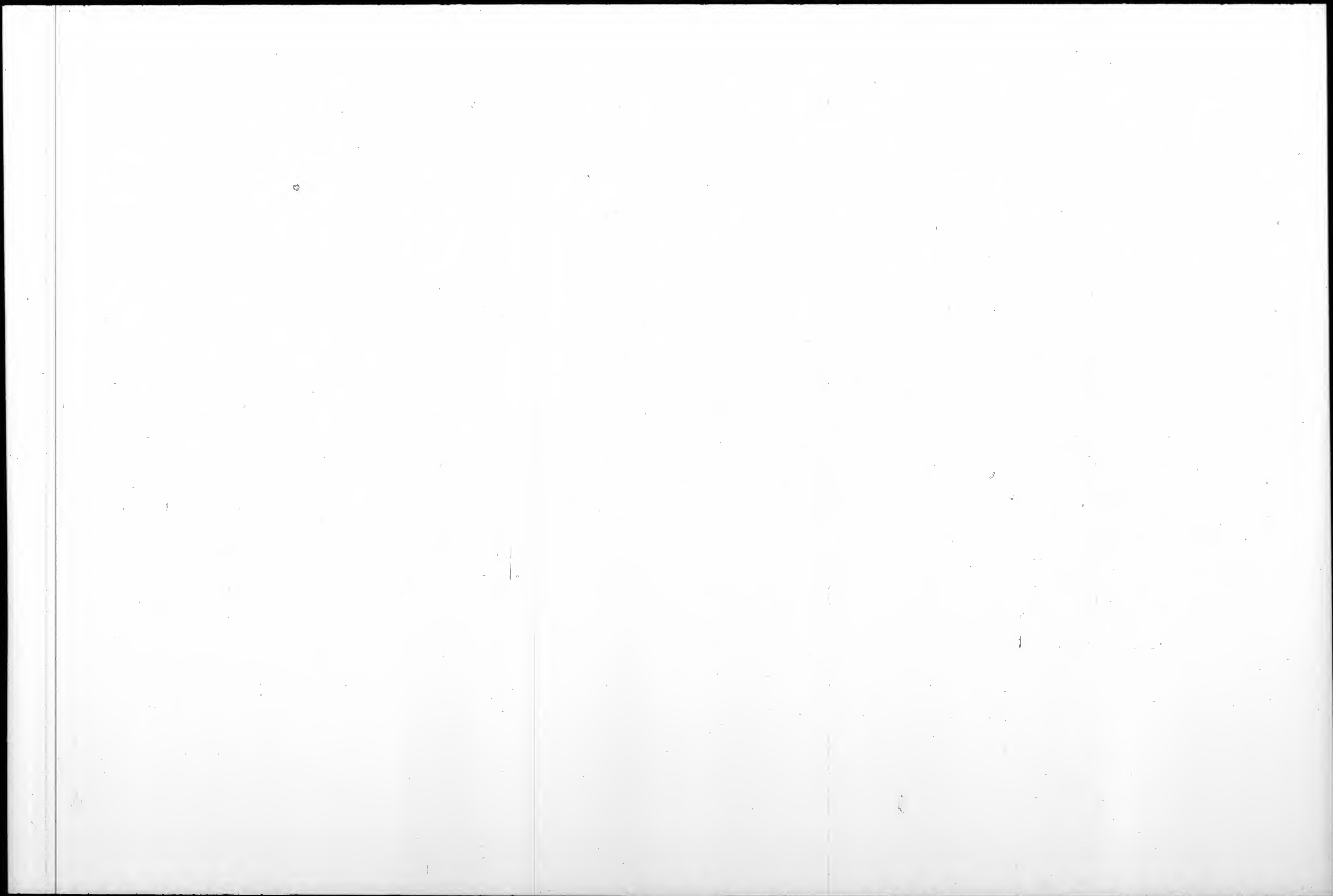


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**Annual report -
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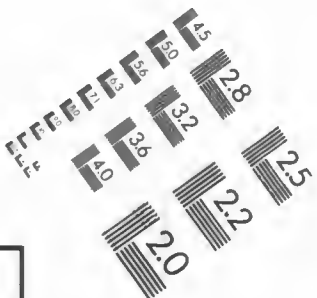


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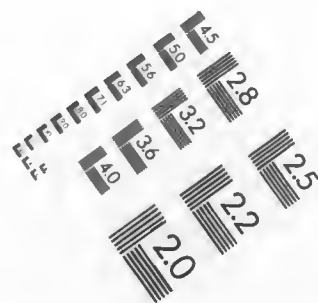
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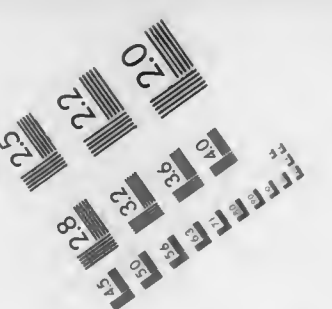
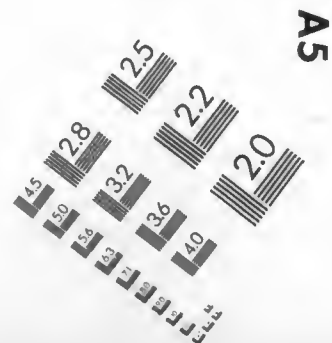
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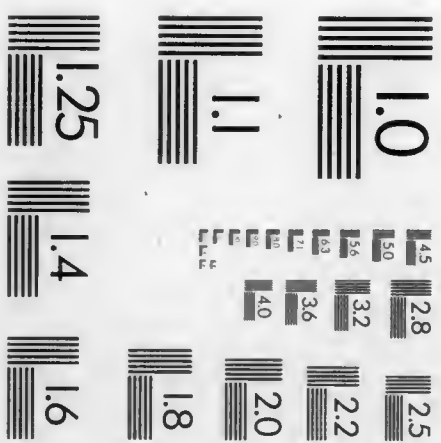
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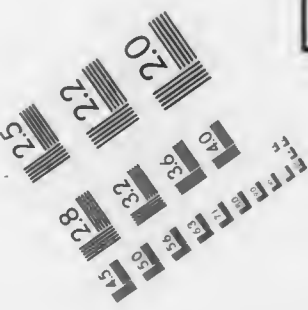
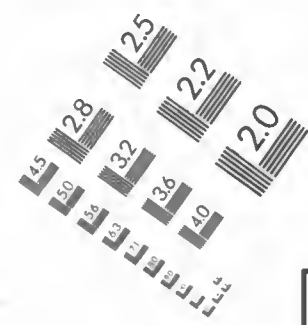


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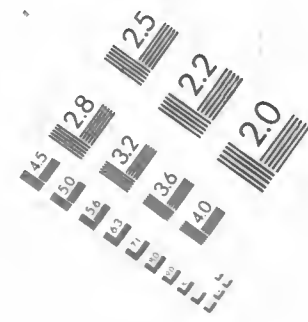
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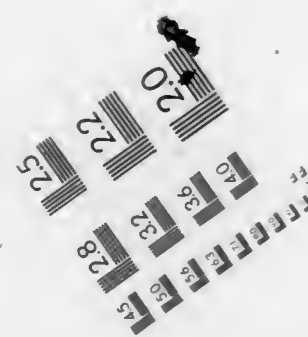


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January 1, 1933

To His Excellency
David Sholtz, Governor

Sir:

I have the honor to submit a report from the State Board of Health covering a decade. For various reasons no annual report has been made since the biennial report for 1921-1922. It is unfortunate that there has been no readily available compilation of activities and statistics of the progress of the general health of the state for the past ten years.

In the attached report of the State Health Officer you will note that he opens with a discussion entitled "A Decade In Public Health" covering the period 1923 to 1932 both inclusive. The report is of necessity brief and only the leading features are discussed. It is an effort to tie up with the past bringing as much of the material as possible up to date. Owing to the reduced budget which calls for economy in every action the report has been mimeographed. All the work has been done in the Multigraph Department with the assistance of the mimeograph in the Bureau of Vital Statistics. There have been many calls for the reports of the State Health Department, in fact so many that the State Health Officer was embarrassed by the necessity of making repeated replies that no report had been published since 1922.

The composition of the State Board of Health is shown on pages 1 and 2 of the State Health Officer's general discussion. On page 4 the various branches of the organization are shown.

In 1931 a Division of Malaria Research was added. The high character of work done in this Division has attracted visitors from all sections of the United States and many from foreign lands. It has been the means of placing Florida in the lime light as a research centre and high in the estimation of scientific workers.

In 1932 the Board established a Division of Malaria Control Studies and later it secured the active cooperation of the Department of Entomology of the Federal Department of Agriculture, all without cost to the state. This largely due to the national and international recognition of the State Health Officer.

The report owing to its brevity is so full of meat that it is in itself a summary which cannot readily be further summarized in a brief letter of transmittal. I note, however, that the State Health Officer has failed to mention Health Notes, a very important instrument for the dissemination of knowledge for safeguarding of health. This is sent only to those who have expressed a desire to have it. It is very useful as well as inexpensive. At present it costs the Board less than \$100.00 per month. It should be continued.

The Board has operated a moving picture truck equipped (on a Ford sedan type) with a generator to show health films in the rural communities where such information is most urgently needed.

One of the most serious setbacks which the State Board of Health has experienced was on finding that there was not enough revenue to operate the budget authorized by the Legislature of 1931. It brought about the suspension of the major part of the Bureau of Child Hygiene and Public Health Nursing. Only three nurses were retained to carry on the work of the Bureau. Through economies effected in administration a fourth nurse was put in service. To carry out the many duties which normally belong to the nurse we should have a minimum of ten nurses. One is doing parent education, one tuberculosis and two are at present devoting their time to midwife control a very important part of the maternity and infancy program. There ought to be at least five nurses constantly in the field in addition to the chief of this work who has a great deal of office work in connection with directing the activities. At present we have no nurses doing communicable disease control. It is hoped that the Legislature may find means to permit restoration of this vital activity.

All bureaus have done praiseworthy work but time and space does not permit me to comment on all. At present there is the best team work and a laudable esprit de corps throughout the entire department.

Pages 18 to 22 inclusive show a summary of financial conditions for the period 1923 to 1931 inclusive. Pages 23 to 26 inclusive contain a more detailed statement of expenditures for 1932 and show commendable stewardship of state funds.

Among the forward steps of the last few years we express appreciation to the last Legislature for passing the County Health Unit law. We hope the counties will take advantage of this law and establish a health service under the general supervision of the State Board of Health.

The report of the Tuberculosis Clinician again brings out the advantages of the Florida climate. In his case finding he finds a much lower infection rate among the Florida born children than what prevails in other states. This work should be continued.

The work in the public health laboratories has shown a phenomenal growth and the report speaks for itself. The same can be said for Engineering, Communicable Diseases and Vital Statistics. I commend them to you.

Respectfully,

H. Mason Smith

H. Mason Smith, M.D., President.

been no general effort to point out the reasons for this mortality until 1930 when Dr. J. R. McCord, Professor of Obstetrics at Emory University, put on a series of post-graduate courses in obstetrics over the state. This course was highly beneficial to the doctors and raised the standard of obstetrical practice. Now we are putting into execution the midwife law by which we hope to eliminate the unfit among the midwives and gradually reduce their number to those who are most nearly qualified for such work.

In surveying the malaria and hookworm situation in the state it soon became apparent that these were the outstanding factors interfering with economic development in the rural communities, especially in a portion of the state which will be found to the north and west of a line drawn from Jacksonville or the mouth of the St. Johns River to Tampa Bay. This is the principal farming community of the state. In this area we have found a malaria incidence among school children which has varied from 5% up to 84% of the children in school. In 1929 a group of 531 persons examined in West Florida showed 58% positive for malaria by microscopic examination. In the same areas we found a hookworm incidence running from 20% to 80% of the children examined. In one school in the western portion of the state I found all the pupils and the teacher infected with hookworms. We put on a demonstration in 1930 in twenty of the counties most seriously infected with the idea of teaching the people in these counties how they could best protect themselves against malaria and hookworm disease. All departments of the State Board of Health have recognized malaria and hookworms as outstanding factors and have concentrated on the problem. The Engineering Department has devoted a great deal of time to privy construction and screening. The members of the Bureau of Communicable Diseases have also preached to the rural people that they should have their houses screened and sanitary privies constructed. A great deal has been done which is worthy of a more detailed analysis. It would form a very interesting study and report to tabulate the work done in the Bureau of Communicable Diseases in the Schick tests and the immunization with toxin antitoxin and later toxoids. The space, however, does not permit going into details.

The activities of our nurses have given good results and have been popular among those with whom they have worked. These are given in detail in their respective sections of the report.

As executive officer of the Board I want to acknowledge the cordial cooperation of all the members of the State Board of Health and of the staff from the lowest in rank to the highest. There has been a most creditable spirit of loyalty and interest in the work notwithstanding the fact that there have been several discouraging periods in pay reductions and various other limitations coming as a result of the present economic conditions.

Respectfully yours,

Henry Hanson

Henry Hanson, M.D.,
State Health Officer.

January 1, 1933

Dr. H. Mason Smith, President
State Board of Health

My dear Dr. Smith:

I have the honor to submit a report of the activities of the past calendar year together with summaries covering the years intervening since the last published annual report. The last annual report is the biennial report for 1921-1922. It is very difficult to cull out the important features and to leave what apparently is less important in a report which is virtually a review of the public health activities covering a decade. About all I and the balance of the staff have been able to do is to outline leading features of the activities covered during the ten years in question. There are many things which have been omitted which are worthy of discussion. With the limitation of personnel and finances we are putting out the most economical report possible.

When I first took over the office of State Health Officer certain changes and additions appeared necessary. One of these was the appointment of a physician as director of the Public Health Laboratories. There are many problems in connection with the laboratory work which require medical education and some years of experience in order to arrive as nearly as possible at the correct solution of the laboratory problems.

There was a great deal of agitation in the country during the years of 1928-1929 over Child Hygiene and Public Health Nursing. A Bureau of Child Hygiene should be headed up by a physician with pediatric training. The set-up in this state placed the Public Health Nursing under the director of the Bureau of Child Hygiene. A woman physician with pediatric training was secured to fill the place of director of this bureau. Many of the ideas of the new director were excellent and were put into practice. An unfortunate incompatibility between the director and some of the older nurses developed which made it desirable to temporarily suspend the bureau for re-organization. The financial conditions which we encountered in 1931 brought this about. A great deal of confusion seems to crop up in this bureau in connection with child welfare and child hygiene. In the minds of a great many these terms are thought of as synonyms, which of course is not at all the case.

Very soon after taking over the office I began to survey mortality statistics. Among the communicable diseases I found tuberculosis, typhoid, diphtheria and malaria to be in a sense leaders in the mortality tables. Although numerically tuberculosis deaths rank fairly high the case incidence in this state is not more than about ten to one. During the past ten years tuberculosis deaths have fluctuated between about 1000 and 1067 which would indicate an approximate total of about 10,000 cases of active tuberculosis. As compared with previous years there have been most creditable results in typhoid and diphtheria control. Our maternal mortality, however, has been very high but until the last Legislature there has been no legal control of the midwife problem in the state and there had

A DECADE IN PUBLIC HEALTH

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The law requiring an Annual Report from the State Board of Health has not been complied with since 1922. From the first of 1923 to the close of 1932 is a decade of great importance in History. The world, and the United States in particular, has passed through peculiar periods of fluctuation in economic stability alternating between peaks of affluence and the troughs of depression.

During this period people have built in imagination wonderful plans for future development, principally to get rich quick.

The boom of 1925-1926 in Florida is the most outstanding example of a mental (aberration) intoxication, spreading (from one to another) like a highly contagious communicable disease. During this period everyone confidently expected to grow rich - to become millionaires. No one took heed of the inevitable tomorrow, the rainy day which came simultaneously with the collapse of the boom. The balloon is now almost completely deflated. The boom introduced an orgy of spending which permeated both the homes and official circles, and caused development of projects the cost of which all but wrecked the state. Many communities were forced into bankruptcy.

It is only fair to admit that some of this affected Health Departments, and gave rise to proposals which could have been carried out on a more economic basis. And yet it is a fact that the plans and operations of the State Board of Health have always been on an honest conscientious basis and usually on an economical plane. Salaries for health workers have never been on a par with those in the commercial fields. While there have been individual discrepancies no one has actually been overpaid.

The responsibilities of the State Health Officer are as grave as those of any State Official and yet he is paid a smaller salary than is paid to a district judge.

During the decade the composition of the State Board of Health has been as follows:

President and Members of State Board of Health. State Health Officer and Secretary.

June 1921 to August 1925 - C. T. Young, M.D., President, Plant City
Chas. H. Mann, Jacksonville
F. C. Moor, M.D., Tallahassee
R. C. Turck, M.D., Secretary, Jacksonville

August 1925 to September 1929 -
Chas. H. Mann, President, Jacksonville
W. D. Nobles, M.D., Pensacola
H. Mason Smith, M.D., Tampa
B. L. Arms, M.D., Secretary, Jacksonville

September 1929 to October 1930 -

Chas. H. Mann, President, Jacksonville
W. D. Nobles, M.D., Pensacola
H. Mason Smith, M.D., Tampa
Henry Hanson, M.D., Secretary, Jacksonville

October 1930 to date -

H. Mason Smith, M.D., President, Tampa
Henry E. Palmer, M.D., Tallahassee
Edward M. L'Engle, M.D., Jacksonville
Henry Hanson, M.D., Secretary, Jacksonville

As the Annual Reports for previous years are examined it is found that there was no report for the year 1919. Dr. W. H. Cox of Brooksville was then State Health Officer in the Administration of Governor Sidney J. Catts.

The following are extracts from a report, to the President of the State Board of Health in 1929 which was never completed or published.

"The present State Health Officer assumed office on the 16th of September, 1929 succeeding Dr. B. L. Arms, resigned. In December 1927 he resumed a relation with the State Board of Health which was interrupted in May 1916. His pre-war connection with the State Board of Health was in the capacity of Senior Bacteriologist in the State Board of Health Laboratories, which service was terminated in May 1916.

"Although not a stranger to the state or the public health work the assumption of the duties of State Health Officer presented rather large and difficult problems. Only three and a half months have passed since assuming office and this is scarcely enough time for one to become oriented in the duties of an office of the magnitude of the Executive of the State Board of Health of Florida. There is much that is new in the routine of the (executive) office which differs from the routine followed thirteen years ago. The State Board of Health is now organized in five separate bureaus which appear to be operating independently. There has not been enough time to arrive at definite conclusions regarding the procedure or any changes which might be inaugurated in the inter-departmental organization.

"On entering the State Board of Health building after an absence of about ten years, one is impressed with the crowding and crying need for more space. Having noted the installation of the Bureau of Vital Statistics shortly before leaving in 1917, it was a surprise to find this Bureau had overflowed its quarters and was occupying the hall-way and all otherwise available unoccupied nooks in the headquarters building.

"A similar condition prevails in the Laboratory, due to the phenomenal growth in the volume of work as compared with conditions while the writer was Laboratory Director. A glance at the old

reports from 1910 to 1916 shows that the work multiplied itself six times during that period as compared with the year 1909.

"The Bureau of Sanitary Engineering also has shown rapid growth and is having some difficulty in accomodating itself to its present cramped quarters. The Bureau of Child Hygiene and Public Health Nursing has had a great impetus during the past few years, largely due to additional funds made available by the Children's Bureau, Department of Labor, through the instrumentality of the provisions of the Shepard-Towner Act.

"The library was established by Dr. J. Y. Porter, the first State Health Officer and is essential both to the public health group and the physicians in practice. A few years ago this service was disrupted. Anyone endeavoring to keep abreast of the trends of the time must have ready available reference material (and it is hoped that an effective library service may soon be reestablished.)

"On the whole the staff of the State Board of Health is outstanding for ability and training. Several members have long and creditable service, among which the following are deserving of mention. Henry P. Brown completed twenty years of unbroken service on the 15th of December, 1929, and Dr. F. A. Brink will complete twenty years service on April 1, 1930".

Thanks to the Rockefeller Foundation we were able to reestablish the Library in January 1932. It was not established as a purely public health library but as a general medical library for the use of the entire medical profession of the State of Florida and others who may have occasion to use it. A library of this nature is as important to public health and medical men as the lawyers books are to the legal fraternity. There is a continuous progress in scientific discoveries which one must keep abreast of in order to render effective service to the State. It is felt that the present library service has increased the efficiency of the Staff by 50%. It has made possible a research which will benefit all who have occasion to call on the State Board of Health for help.

At the time of writing or attempting a resume of ten years of the State Board of Health's activities, three and one half years after assuming the office of State Health Officer, one has a fairly comprehensive grasp of the health problems in the State. It seems an irony of fate, however, to be faced with a general economic condition which may necessitate the most drastic cut in the budget which the Board has ever been called upon to meet. The Governor has accepted the challenge of balancing the budget, a staggering task, in which his Cabinet is valiantly cooperating. As usual each of the State Governmental Departments wish the economies applied to the other department and not his own. It is natural that the State Board of Health feels that it should not be cut as heavily as some others and yet in an effort to comply with instructions from the Chief Executive and to manifest a spirit of cooperation the Health Department has cut its budget more drastically than any other State Department with the exception of the State Department of Public Welfare. How much can sick people accomplish? Can a Health Department be sick?

The State Board of Health as now organized consists of the following:

- Administration
- Bureau of Communicable Diseases
- Bureau of Diagnostic Laboratories
- Bureau of Sanitary Engineering
- Bureau of Vital Statistics
- Division of Public Health Nursing
- Division of Malaria Research
- Division of Malaria Control Studies
- Division of Library Service
- Division of Drug Inspection

There is at present a Division of Public Health Nursing which is the survivor of the Bureau of Child Hygiene and Public Health Nursing. When first organized this was known as the Bureau of Education and Child Welfare but at a meeting of the State Board of Health on April 19, 1926 the name of this Bureau was changed (from the Bureau of Child Welfare) to the Bureau of Child Hygiene and Public Health Nursing.

For a number of years the State Board of Health operated a Division known as the Orthopedic Department, or a service to crippled children. The Chief Surgeon held clinics in various sections of the state and there examined all who presented themselves at the clinics. From these he would select some who were in most urgent need of operation and where the results were most promising. As many of them were taken as the funds set aside for this purpose would permit. In 1929 a law was passed creating a Crippled Children's Commission. During the first year after the passage of this law, while the Commission was getting organized, the State Board of Health continued its work and treated (91 during 1929-1930 and 40 during the first 6 months of 1931) 131 children at its own expense. During the last few months of the Board's participation in this work certain funds were pooled with the funds of the Crippled Children's Commission and the service of the Board continued as before with this one exception. There is attached in a later section of this report the work done for crippled children and its per capita cost.

We have also a Division of Drug Store Inspection which was provided for by acts of the Legislature in 1927. This division has rendered a service of considerable value to the drug trade in the state. It has raised the standards of pharmacy and offers a greater guarantee to the sick that they will have prescription accurately compounded by graduate licensed pharmacists. It often happens that health is vitally affected by the employment of drugs (chemicals) of a known potency. In critical illness this is a matter of life or death.

RESEARCH

We at present have three separate divisions on malaria investigation. The first of these, the Division of Malaria Research, was established in 1930 by the Rockefeller Foundation with Dr. Mark F. Boyd as director and Dr. W. K. Stratman-Thomas as associate. In 1931 the U. S. Public Health Service established (in co-operation with the State Board of Health) a Division of Malaria Control Studies under the direction of Dr. T. H. D. Griffiths. For some years the Bureau of Entomology has had a station in the state studying different problems, devoting some time to insects which affect man. This station has been under the immediate

supervision of Mr. G. H. Bradley until a few months ago when Dr. W. V. King returned from his foreign detail and is now in personal charge of the station. When Dr. King returned to the state he very graciously agreed to be Consultant in Entomology to the State Board of Health. This gives Florida the benefit of the expert knowledge and training of three leading malaricologists in this country. The work that has been done and is being done in these three divisions is of the greatest value to the state.

Dr. Boyd's work is largely a study of the clinical phases of malaria, together with the role of the Anopheles mosquito as a transmitter, the nature of the disease, and its application as a correcting agency in certain nervous system diseases. Numerous publications have come out from this station replete with knowledge which has not heretofore been available to the scientific world. A brief statement of his work will be found in another section of this report.

Dr. Griffiths started his work first in a series of mosquito (Anopheles) surveys both for adults and larvae thereby locating the areas which are most likely to show a high incidence of malaria in the population in that vicinity. Later on a series of blood smear surveys were made in schools in seven counties where the average incidence in the counties ran from 2% to 12% positive by microscopic examination. In some schools of some counties the positive blood rate ran as high as 84% of the children in school. Many of the schools showed a rate running from 30% to 70%. Dr. Griffiths' findings are included in this report, where the percentages can be studied in more detail.

Dr. King's work has not yet been organized insofar as his participation in the State Board of Health program is concerned. It is expected, however, that before the close of 1933 we will have valuable contributions from Dr. King and his associates.

MALARIA RESEARCH

Most people think of malaria as a malefactor and it is for that reason we have the elaborate research and study and the aid of the nationally and internationally known experts mentioned above, engaged in the effort to elucidate the unknown of this tropically world wide disease. In the course of these studies we have run into a phase of "Malaria the benefactor". Wagner Jauregg of Vienna in working with malaria found that certain individuals suffering with neurosyphilis showed improvement after an attack of malaria. This naturally opened fields for investigation and confirmatory experimentations. The results of the experiment justified further study, and led to further artificial inoculation of certain types of patients, sufferers with such neurosyphilis as general paresis and tabes dorsalis. About 130 persons with general paresis of the insane have been given this treatment in our Malaria Research Division with the result that many have improved sufficiently to be paroled to their homes.

During the past year we have applied the experiment to selected individuals who have developed the condition known as "Wassermann fastness" where cerebral symptoms were becoming manifest. We have one outstanding case, a mechanic, who was practically incapacitated and was doing no work of any consequence, in fact, he was about to be dismissed from the shop. After a course of this treatment he has gone back to full duty and has gained 20 pounds in weight. Later the treatment was tried on tabetics and one case of amyotrophic lateral sclerosis. The results of these experiments will be reported next year.

DECADE IN PUBLIC HEALTH

The typhoid death rate in 1923 was 15.5 per 100,000 and continued at about this level until the middle of 1926 when it fell below 15 and from then on there has been a continuous decline until the middle of 1930 which shows a slight rise. The rate now is about 5.8.

MALARIA

Malaria seems to run to a peak every ten years with some intermediate fluctuations. The highest rate in the decade under discussion occurred in 1929, with 470 deaths, a rate of 32.8 per 100,000 - the previous peak being the one in 1919 which showed a death rate of 45 per 100,000. The case rate in malaria is usually 200 clinical cases for each death. The number of reported deaths has run from 205 to 470 during this same decade or from 41,000 to 94,000 clinical cases each year.

TUBERCULOSIS

Tuberculosis has had a consistently falling curve except for the year 1926 (boom year) which may be accounted for by a discrepancy between the estimated populations and the actual. The rate in 1923 was 95 as compared with the 1931 rate of 70.

DIPHTHERIA

Diphtheria at the beginning of 1923 had a rate of about 8 plus. As a result of an active immunizing program started in 1926 the rate has fallen consistently to less than 5 in 1929, to rise to just over 5 in 1930 and then dropped to 4.9 in 1931. If parents were more consistent and prompt in calling a qualified physician when the children complain of sore throat the death rate from diphtheria would be much lower. A death due to diphtheria is evidence of delayed diagnosis and either insufficient or too late administration of diphtheric antitoxin.

PNEUMONIA

The pneumonia rate in Florida has been low except during years when "Flu" was epidemic but even then was lower than the rate for the U. S. Registration Area. In 1923 the rate in Florida was about 65 while for the Registration Area it was 110. In 1931 our rate was about 55 while in the Registration Area it was near 85. It is unfortunate that many of our tourists do not realize the advantage of remaining in Florida in the spring which is the most dangerous pneumonia period in the north.

AUTOMOBILE DEATHS

We crossed the curve for the U. S. Registration Area in 1923 and have remained from 10 to 20 points above ever since. It is a fact, however, that many of our automobile fatalities occur among tourists. The rate in 1923 was 15 - in 1931 it was about 33 per 100,000.

INFANT MORTALITY

Infant Mortality in 1923 was about 78, rose to 82 in 1924, both years above the rate for the U. S. Registration Area but from that time on it began falling and has fallen consistently ever since. It fell below the curve for the U. S. Registration Area in 1928 when the rate was 77 and has slowly and steadily declined since to the 1931 rate of 64. We are inclined to credit the drop in infant mortality in part to a consistent improvement in milk sanitation throughout the state. There are also many other factors, such as Public Health Nursing and the work of the Bureau of Communicable Diseases which is discussed in another section of this report.

PUERPERAL RATES

(Deaths of mothers due to child bearing)

Puerperal Rates in Florida have been high. These reached their peak in 1923 with a rate of 12.4 per 1000 live births. These dropped quite steadily until the middle of 1928 to the rate of 9.5 then rose to 9.9 in 1930 which is the rate for 1931. Curiously there was exactly the same number dying from this cause in 1930 and 1931, or 267 each year. The reports for 1932 are incomplete and cannot be included in this discussion. There were however 12 fewer deaths during the first eleven months than for the corresponding period of 1931. Up to the time of the enactment of the midwife law by the Legislature of 1931 we had no legal control of midwives and any one could engage in that practice. It is said that there were at one time 17 male midwives in the state both black and white. While the deaths charged to midwives appear fewer or in other words the puerperal rate is on the face of it more favorable to midwives than to physicians it should be remembered that the midwife refers all of her difficult cases to the doctor who then is charged with the deaths.

PELLAGRA

Pellagra is one disease which seems to have defied the depression. The fatalities have dropped from 313 in 1929 to 220 in 1931, the same number as for 1927. There is still some difference of opinion as to etiology but it seems that the majority of medical men have accepted the dietary theory.

SMALLPOX

Smallpox which used to be one of the most serious among the communicable diseases is well under control. There has not been a death from smallpox in this state since the one (a colored man in Seminole County), in June 1928. People who possess normal intelligence are accepting the protection which vaccination offers and one can truthfully say that only people who are mentally unbalanced make serious objection to vaccination.

POLIOMYELITIS

Poliomyelitis (infantile paralysis) which frequently causes great alarm in the north by its extensive outbreaks has never been a serious problem in Florida. Sporadic cases occur but these seem to be isolated and there has been no extension of the disease into anything like an epidemic.

HOOKWORMS

Unless one turns to the records of laboratory examinations made 20 or 25 years ago it may seem that the hookworm problem in the state is serious and that little or no progress has been made. In 1910 the first 7500 tests made for this disease showed 57% to be infected, most of them seriously so. Last year an analysis of 250,000 tests showed about 25% positive manifesting a distinct improvement. We still have sections (in the sandy portions) in the state where from 20 to 80% of the children are infected. This condition together with the prevalence of malaria constitute the most serious handicaps to our rural population. It is what holds the state back.

VENEREAL DISEASES

The Venereal Disease rate (incidence) presents the most appalling problem for the Health Officers. The new case rate over the nation is 3.46 for syphilis and 5.71 for gonorrhea per 1000 population (est. 1930). There are 643,000 cases of syphilis constantly under treatment and 474,000 cases of gonorrhea (est. 1930).

The seriousness from the Communicable Disease standpoint is that among the ignorant and poor treatment is neglected because of failure at first to recognize the true nature of the disease and secondly for want of means to pay for treatment when it will do the greatest good. We ought to have a special appropriation of \$20,000. to \$30,000. for strictly treatment clinics. The financial loss due to incapacitation is enormous. Examination for evidence of Venereal Diseases constitutes the biggest single item in the list of laboratory tests. See section dealing with report of Director of the Diagnostic Laboratories.

In the earlier part of this report, quotation from unpublished report, reference was made to the rapid increase in the laboratory work. It is striking to compare the volume of work in 1909 and 1932, which is as follows: 5,762 for 1909 and 210,000 for 1932. Of this volume the Kohn tests far outnumber all others individually.

The decade covered in this report has shown a rather remarkable change in disease incidence. It has swung most of the leading causes of deaths into the old age group and those represented by the worn out machinery. The average expectancy of life has been increased about ten years. The maximum length of life however does not appear to be greatly affected.

TWENTY LEADING CAUSES OF DEATH, FLORIDA, 1931

CAUSES	DEATHS
Heart Disease (all forms)	2,810
Nephritis (all forms)	1,737
Cerebral Hemorrhage	1,304
Cancer (all forms)	1,072
Tuberculosis (all forms)	1,067
Pneumonia (all forms)	863
Influenza (all forms)	607
Automobile Accidents	514
Syphilis	458
Homicide by Firearms	300
Diarrhea and Enteritis	292
Other Diseases of Stomach	223
Pellagra	220
Appendicitis	220
Diabetes Mellitus	216
Malaria	205
Hemiplegia	190
Accidental Traumatism by Fall	172
Accidental Drowning	140
Cirrhosis of Liver	131

TWENTY LEADING CAUSES OF DEATH, FLORIDA, 1923

CAUSES	DEATHS
Heart Disease (all forms)	1,761
Tuberculosis (all forms)	1,079
Nephritis (all forms)	1,002
Cerebral Hemorrhage	832
Pneumonia (all forms)	815
Cancer (all forms)	642
Diarrhea and Enteritis	556
Paralysis	313
Malaria	293
Other Diseases of Stomach	244
Influenza (all forms)	235
Homicide by Firearms	225
Syphilis	179
Automobile Accidents	178
Typhoid	177
Appendicitis	129
Accidental Drowning	110
Diabetes Mellitus	97
Puerperal Albuminuria & Convulsions	94
Intestinal Obstructions	92

It is interesting to note in the table on the leading causes of deaths that tuberculosis, which in 1923 was second on the list, dropped to fifth place in 1931, and typhoid which was fifteenth in 1923 had dropped out of the first twenty in 1931. As the table is examined it is startling to note that automobile deaths which were fourteenth on the list had come up to the eighth place when these statistics were completed. While it is a fact that there are many more who travel by automobile than there were ten or twelve years ago, it also seems that there is an increasing recklessness on the part of a number of drivers, who not only menace their own lives but the lives of the careful driver and those who are riding with him. It seems that many experience a Dr. Jekyll and Mr. Hyde change as they get in and out of their cars. In their automobiles they not only lack ordinary courtesy but are manifestly intolerant of the most patent rights of the other driver. Why it should be so important to reach the stop light before the other person is difficult to guess. In this effort many burn their brake bands which soon leads to difficulties and possible accidents on account of improper functioning when it is important to be able to stop in an emergency. Among automobile drivers there is NO, "YOU FIRST MY DEAR ALPHONSO", but rather a "ME FIRST, - DAMN YOU, STAY BACK, GET OUT OF THE WAY AND LET ME BY"!!! Unfortunately there is little the health department can do about it, - there seems to be no immunization against the reckless driving mania.

RABIES

From the time of the earliest medical literature rabies has been known and dreaded. There is no cure for rabies (hydrophobia) once the clinical symptoms are definitely manifested. The suffering is one more of mental anguish than acute physical pain, but the mental anguish seems to surpass anything known as a torture to human beings. Since Pasteur's discovery of the principle of drying

a portion of the cord of a rabbit, and emulsifying it in glycerine and giving daily inoculations of this attenuated virus we have had a preventive for rabies of hydrophobia. During the last few years a vaccine has been prepared for dogs, and the experience indicates that of dogs so inoculated 85% to 90% will not develop rabies even though bitten by other rabid animals. Last summer we drew up a model ordinance for municipalities to require all dogs to be licensed and given the annual inoculation against rabies. Since that time we have had less rabies in the state than during the months previous to this requirement. Some municipalities (Sarasota for example) have had no rabies since enforcing such an ordinance. Previous to the adoption of the ordinance we had five human deaths within a year's time. We hope all municipalities will adopt and enforce such ordinance.

THE WORK IN GENERAL

While the preceding discussion has brought out to some extent what the work of the State Board of Health is, there still remains a great deal which the average citizen can visualize only by a personal visit to the headquarters offices or by going with the employees in the regular daily round of duties. The offices at headquarters are never closed except for a while on Saturday and Sunday afternoons. The laboratory is open all days of the year whether a legal holiday or not. In the report from the laboratory division the extent of the work is portrayed.

On the fourth page of this general discussion the organization set up is found. At present there are four Bureaus and five Divisions, in fact there actually is another, the Division of Accounting. The work in Florida is different from other states, in that there are only three cities which have full time health departments, and only three counties with a full time health unit for the county. The health work in the balance of the state is at present a duty of the State Health Department, and when you consider the extent of territory, the staff available for the work is too small. From Jacksonville to Key West is about 520 miles and from Jacksonville to Pensacola is 384 miles. The field medical officers each have 20 counties to cover, and it is evident that these men can only do a superficial type of work. They can only respond to emergencies or be what is known as "trouble shooters". Rather than reduce the staff it should be increased. When we succeed in developing enough county health units we will be able to reduce certain portions of the central staff and at the same time have more effective work in the organized counties.

The Public Health Nursing at present is inadequate. We have five nurses, two devoting full time to midwife licensing and registration. For this work there ought to be at least five nurses devoting full time to the teaching of the midwives. Classes should be held regularly. We must have them for the rural communities where the doctors will not go.

One nurse is devoting all of her time to "Parent Education", a phase which deals with psychology and factors which control character development, health habits, etc. This is a very important phase of child hygiene in which the parents are made to realize that parents should inculcate the vital principles of health in a growing child's habits.

Another nurse has worked with the Bureau of Communicable Diseases in the tuberculosis case finding and testing clinics. One nurse for this program is not enough. There should be enough nurses to make possible adequate follow-up and a cooperation with the practicing physician interested in tuberculosis.

At present we have only one nurse on general public health nursing duty. Here too there ought to be enough nurses to contact the county nurses and other health workers so as to work out a coordinated program for the entire state. There is a great need for home visits, to teach hygiene in the home, how to care for communicable disease and other factors influencing the health of the people. We need at least five additional public health nurses.

Florida ought to start rebuilding its Child Hygiene program, which can be done without setting up an elaborate division as if it were something independent of a general public health program. Everything which the health department does has a direct bearing on the health of the child. It is unfortunate that some in their enthusiasm for proving their own importance have beclouded the issue with the idea that child hygiene is a thing apart from public health. Those phases of health development of the child which do not belong in the field of public health belong to the private practitioner or the pediatrician. There is no call for the Health Officer to trespass on the field of the private practitioner.

The State Health Department has outgrown its present quarters. The building was designed on the basis of expectations 25 years ago, when one could not visualize a hundred percent increase in population in 20 years and what it would take to meet the new demands. When the present building was designed the State had no Division of Public Health Nursing, Sanitary Engineering or Vital Statistics, as we have now, each doing extensive and important work.

The Division of Public Health Nursing we are housing in the Administration building in a room which was originally designed for an office for the Director of Laboratories. The Engineers have been moved into a building which was put up for an animal house for the experimental animals used in connection with the laboratory work.

When the Division of Vital Statistics was first established it began its operation in a room on the first floor which was intended (and for about four years used) for an assembly room.* The magnificent progress made in collecting vital statistics rapidly filled all available space. The vault which was put in was soon over-filled and the records began overflowing into the corridors and all available nooks. Since the law requires such records (which by-the-way cannot be replaced if once destroyed) to be kept in a fire proof building in a fire proof vault, the Board had to look about for more suitable offices, and rented space in the Florida Theatre Building for this Bureau until such time as the State should find itself in condition to provide new and adequate quarters for the State Board of Health. For 2,657 square feet of floor space in a class A fire proof building for the Bureau of Vital Statistics we are now paying \$300.00 per month in rent. Last year we paid \$380.00 per month rent for the Bureau of Vital Statistics. Even at \$300.00 per month it amounts to \$3600.00 a year which would pay interest on \$60,000.00 at 6% per annum. At the present time an excellent building could be put up for \$120,000.00. Building can be done on a more economical basis now than at any other time and at the same time furnish employment to a great many who need an income to buy food for themselves and family.

The new building would add greatly to the efficiency of the State Board of Health staff in having all department heads in the same building also it would make operation more economical. Florida could well do this as an advertisement to tourists and prospective settlers who wish health guarantees before coming to the State.

*The Duval County Medical Society held its meetings in this room and during this period the present State Health Officer enjoyed the honor of being President of the Duval County Medical Society.

We need added space to house such important activities as:

Malaria Research
Malaria Control
Entomological Studies
County Health Unit Development
Venereal Disease Control
Dental Hygiene

We have (up to date) been negligent in provision for Dental Hygiene which is very important in the development of the child.

Since most people enter and leave the State via Jacksonville a strong advertising point would be to cite the State Board of Health building and offices as one of the attractions for visitors. It would at the same time give them an assurance of health protection which would be self evident to those seeing the work in progress.

Insofar as a budget is concerned the State Board of Health should have its services evaluated and appropriation or millage voted accordingly. It is proper to ask what the State Board of Health is costing the tax payer. On the basis of a half mill it means that every person who pays taxes on \$1000.00 of assessed valuation pays 50¢ to the support of the Health Department. A recent analysis shows in a distribution of the tax dollar that only 1¢ goes to health. The most the State Health Department has cost the State was in the fiscal year 1926-1927, the hurricane year at the end of the boom, a total of \$354,256.10. The cost for the fiscal year 1931-1932 was \$227,987.11. The annual loss due to malaria alone varies between \$400,000.00 and \$1,000,000.00 each year. The loss from hookworm disease is greater than that. Approximately 250,000 persons in this State have hookworms which has been estimated to cause an annual loss to the State of between \$8000,000.00 and \$10,000,000.00. A great deal of both of these losses can be saved. Our new proposed budget of \$178,370.00 is inadequate and not in proportion to what other State Departments are spending. The least sum on which the State Board of Health can operate efficiently is (even in these times of reduced pay and lowered costs) \$240,000.00. This is a 16¢ per capita per annum for health. How little can a State like Florida afford to spend?

In closing I want to say that the leading features in the State program are:

1. Development of County Health Units
2. Malaria Research and Control Studies.
3. An Efficient General Program

Acknowledgment is made of valuable aid from the Rockefeller Foundation to the Laboratory, for aid in reestablishing the Library and for the excellent research program at Tallahassee. To the U. S. Public Health Service for aid in developing the County Health Units and for the establishment of the Station for Malaria Control Studies, and for assistance in segregation of lepers.

The staff has been faithful and cooperative in spite of many discouragements and cuts both in salaries and operation.

At the close of the year 1932 the Florida State Board of Health had the most advanced program in its history and was widely recognized.

Acknowledgment is made of the cordial cooperation of the Governor and of the State Board of Health.

ORTHOPEDIC DEPARTMENT

YEAR	NO. PATIENTS EXAMINED.	NO. NEW PATIENTS TREATED	PATIENTS FROM PREVIOUS YRS.	APPROX. COST PER PATIENT
1924	28	26	--	\$ 165.57
1925	52	46	4	122.06
1926	52	52	7	215.78
1927	57	57	14	180.89
1928	60	55	14	177.25
1929	39	36	9	273.06
1930	35	27	11	219.59
1931	32	24	8	201.25
	355	323	67	\$1,555.45

CAUSES OF CRIPPLING

Spastic Paralysis	35	Ununited Fracture	2
Infantile Paralysis	76	Pes Planus 3rd degree	1
Ischemic Paralysis	5	Ankylosis of joints	3
Spina Bifida with Paralysis	2	Ricketts	3
Birth Paralysis	1	Congenital deformed foot & leg	1
Synostosis of radio ulna joint	1	Contracted scar from burn	7
Chorea-Hypopituitarism	1	Pigeon Breast	1
Club Foot	53	Abscess Knee	2
Tuberculosis of Elbow	2	Abscess Hip	6
Tuberculosis of Spine	9	Fractured Spine	1
Tuberculosis of Hip	14	Stenosis Trachea	1
Tuberculosis of Knee	2	Scoliosis	6
Tuberculosis of Sacro-iliac joint	1	Periostetis	1
Bone Tumor - benign	1	Legg-Perthes Disease	2
Dislocation of Hip	6	Fractured Knee	2
Dislocation of Elbow	2	Fractured Tibia	2
Muscular Atrophy - Progressive	1	Fractured Femur	2
Osteomyelitis	25	Knock-Knee & Flat Feet	1
Torticollis	2	Web Fingers	1
Syringomyelia	1	Hammer Toes	1
Harelip	5	Encephalitis	1
Harelip & Cleft Palate	11	Polydactylitis	1
Arthritis (all forms except Tb.)	12		

Dr. Henry Hanson, State Health Officer
State Board of Health
Jacksonville, Florida

Dear Dr. Hanson:-

I herewith submit the annual report of the Library of the
State Board of Health for the year January 1, 1932 to January 1, 1933.

On January first, 1932, re-organization of the State Board of Health Library was begun. The collection consisted of something over two thousand bound volumes and magazines, together with a large number of pamphlets, bulletins, state health reports, etc. The larger portion of this collection was on shelves in the third floor attic. The two rooms on the second floor which had been planned for the Library were put in shape to house the collection. Suitable shelving, consisting of wall and center book-cases was obtained.

Classification

The Library is classified by the Library of Congress system. This is by far the most scientific classification yet evolved and is the one in use in many special libraries.

CATALOGUE AND ACCESSIONS

At the end of 1932 the catalogue contained 3090 typed cards and a total of 1667 volumes had been catalogued. There is also a pamphlet file containing approximately 2000 pamphlets arranged alphabetically according to subject. This file is of the utmost importance as it contains for the most part reprints of valuable current papers on medical and public health subjects.

ARRANGEMENT

The main room of the Library is used as the general reading room for the staff and patrons, and contains the catalogue, medical directories, Florida reports and material, the pamphlet collection and the more general reference books. There is also a magazine rack which holds the current copy of all magazines received.

BINDING

The magazines bound since January 1932 are as follows:

American Medical Ass'n. Journal
Journal of Infectious Diseases
American Journal of Public Health

The binding of technical magazines is of importance, because only in this way are they made available for quick and accurate references, and only in this way are they preserved for the collection. The State Board of Health Library is very fortunate in having nearly 600 bound volumes of various medical periodicals which in many cases begin in the 1890's and continue through 1916. There are also approximately 3000 unbound magazines.

GIFTS

The doctors of the State have shown their interest in the Library by donating large files of magazines, which have been of much use to us in completing our files. We have also received a good many books through various sources. The Florida Tuberculosis and Health Association have turned their entire collection over to us, and have given us some 200 books. In this collection is the current file of the American Review of Tuberculosis, American Heart Journal, Journal of the Outdoor Life, and the Survey.

SERVICE AND USE OF THE LIBRARY

The response of the public health workers and the medical profession of the state during this first year indicates the vital need for such a library. The Library is able to be of much help in preparing papers, securing information and bibliographies from various sources not generally open to the individual worker. We have answered letters and questions relating to medicine and public health from all over the state.

Very truly yours,
(Signed) Elizabeth Bohnenberger,
Librarian

DRUG STORE INSPECTION

January 1, 1933

Dear Dr. Hanson:

The following is a statement for the Division of Drug Store Inspection for the calendar years July 2, 1928 to December 31, 1932.

1928 (1 Inspector)		1929 (2 Inspectors)	
Stores Registered	391	Stores Registered	655
383 (1-4 pharmacists)		646 (1-4 pharmacists)	
8 (no pharmacist)		9 (no pharmacist)	
Inspections made	674	Inspections made	1,900
1930 (2 Inspectors)		1931 (2 Inspectors)	
Stores Registered	324	Stores Registered	795
310 (1-4 Pharmacists)		792 (1-4 pharmacists)	
14 (no pharmacist)		3 (no pharmacist)	
Inspections made	1,149	Inspections made	2,180
1932 (2 Inspectors)			
Stores Registered	609		
608 (1-4 Pharmacists)		Signs removed	283
1 (no pharmacist)			
Inspections made	2,119		

Respectfully submitted,
(Signed) M. H. Doss, Chief Inspector.

January 1, 1933

Dr. Henry Hanson
State Health Officer
Jacksonville, Florida

Dear Doctor Hanson:

The following are concise Financial Statements of Receipts and Disbursements of the State Board of Health for calendar years beginning with 1923 and ending with 1931. Full and complete financial reports are made every year and copies sent to the Governor, State Comptroller, State Auditor and members of the State Board of Health.

The balance brought forward from 1922 (\$27,500.01) is the figure shown in printed report of the State Board of Health for 1921-22.

Also included in this report are the small accounts from Special Fees beginning with the years in which the activities began:

Centralization of Marriage and Divorce Records,
Registration of Doctors, Midwives, Etc.,
Drug Store Inspection,
Division of Malaria Research.

The 1932 statement is made up in more detail and embraces--General Statement of Receipts and Disbursements, Analysis of Receipts and Statement of Disbursements by Departments; also the 1932 statements for the following small accounts:

Centralization of Marriage and Divorce Records,
Registration of Doctors, Midwives, Etc.,
Drug Store Inspection,
Division of Malaria Research,
Leon County Health Unit,
Registration of Midwives.

Yours very truly
(Signed) G. Wilson Baltzell
Auditor

B/w

Report of the multigraph department for the number of sheets handled through the multigraph and mimeograph machines, and the other handling of paper to complete the job.

MULTIGRAPH DEPARTMENT
State Board of Health
Jacksonville, Florida

Year	Sheets Through Multigraph	Sheets Through Timeograph	Peds	Performances of Sheets	Books Stitched	Sheets Punched	Sheets Assembled	Sheets Folded	Sheets Numbered
1920	670,571	10,740	831		17,000				
1921	810,345	16,265	2,326	40,000	7,657				
1922	1,186,465	17,165	3,922	40,000	43,100				
1923	1,220,695	24,970	5,558	49,000	7,976				
1924	1,266,736	12,940	5,620	30,500	7,600	200			
1925	1,234,755	25,714	5,700		14,900				
1926	2,072,755	46,685	5,700	34,750	9,310		50,000		
1927	1,667,516	59,950	8,083	74,100	3,627				
1928	1,535,527	44,325	7,235	20,000	4,000		45,000		
1929	876,520	34,785	5,494	45,000	2,763		34,000		
1930	2,256,378	447,670	9,203	49,625	3,457	1,000	59,175		
1931	1,569,594	65,080	7,619	137,500	4,998	2,000	100,000		
1932	787,173	62,990	1,486	32,500	2,698	25,200	46,000	2,558	1,000
Total	17,155,030	871,279	69,377	552,975	129,092	23,400	331,175	2,558	5,750

The above total figures are for the years 1920 to June 30, 1932. The total number of jobs as recorded in work book is 6,170, but does not record the actual number of forms set for the various jobs.

ANNUAL STATEMENTS
STATE BOARD OF HEALTH

1923	
Balance from 1922	27,500.01
Receipts from all sources 1923	133,716.20
Disbursements, 1923	161,216.21
Balance December 31, 1923	132,313.42
*****	28,902.79
1924	
Balance from 1923	28,902.79
Receipts from all sources 1924	217,504.22
Disbursements, 1924	246,407.01
Balance December 31, 1924	205,485.93
*****	40,921.08
1925	
Balance from 1924	40,921.08
Receipts from all sources, 1925	259,281.61
Disbursements, 1925	300,202.69
Balance December 31, 1925	227,152.63
*****	73,050.06
1926	
Balance from 1925	73,050.06
Receipts from all sources, 1926	297,093.63
Disbursements, 1926	370,143.69
Balance December 31, 1926	362,102.75
*****	8,040.94
1927	
Balance from 1926	8,040.94
Receipts from all sources, 1927	306,620.50
Disbursements, 1927	314,661.44
Balance December 31, 1927	286,414.34
*****	28,247.10
1928	
Balance from 1927	28,247.10
Receipts from all sources, 1928	212,877.03
Borrowed from Agricultural Department	241,124.13
Loans from banks	25,000.00
Disbursements, 1928	266,124.13
Balance December 31, 1928	24,999.62
*****	291,123.75
*****	258,767.48
*****	32,356.27
1929	
Balance from 1928	32,356.27
Receipts from all sources, 1929	297,310.39
Loan from Centralization of Marriage & Divorce Records	329,666.66
Disbursements, 1929	10,000.00
Paid off Loans	339,666.66
Balance December 31, 1929	256,670.07
*****	82,996.59
*****	49,999.62
*****	32,996.97

ANNUAL STATEMENTS
STATE BOARD OF HEALTH

1930	
Balance from 1929	32,996.97
Receipts from all sources 1930	288,089.11
Loans from:	321,086.08
Inspection Fund Agricultural Department	5,000.00
Centralization of Marriage & Divorce Records	15,000.00
Disbursements, 1930	20,000.00
Paid loan to Centralization of Marriage & Divorce Records	291,431.06
Balance December 31, 1930	49,655.02
*****	10,000.00
*****	39,655.02
1931	
Balance from 1930	39,655.02
Receipts from all sources 1931	209,132.23
Loan from Centralization of Marriage & Divorce Records	248,787.25
Disbursements, 1931	15,000.00
Return of loan from Centralization of Marriage and Divorce Records	263,787.25
Deficit balance December 31, 1931	260,685.82
This is a deficit operating balance.	3,101.43
The State Comptroller shows	15,000.00
balance as of Dec. 31, 1931	11,898.57
which does not take into	
account Dec. disbursements not	
paid until January, 1932	19,509.15
giving balance as above	11,898.57

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ANNUAL STATEMENTS
STATE BOARD OF HEALTH
CENTRALIZATION OF MARRIAGE & DIVORCE RECORDS

<u>1927</u>	
Receipts	\$ 4,910.00
Disbursements	4,849.50
Balance December 31, 1927	<u>60.50</u>

<u>1928</u>	
Balance from 1927	60.50
Receipts	12,293.75
	<u>12,354.25</u>
Disbursements, 1928	9,860.81
Balance December 31, 1928	<u>2,493.44</u>

<u>1929</u>	
Balance from 1928	2,493.44
Receipts	15,643.95
	<u>18,137.39</u>
Disbursements, 1929	6,295.43
	<u>11,841.96</u>
Loan to State Board of Health	10,000.00
Balance December 31, 1929	<u>1,841.96</u>

<u>1930</u>	
Balance from 1929	1,841.96
Receipts	12,703.50
	<u>14,545.46</u>
Loan repaid by State Board of Health	10,000.00
	<u>24,545.46</u>
Disbursements, 1930	8,979.88
	<u>15,565.58</u>
Loan to State Board of Health	15,000.00
Balance December 31, 1930	<u>565.58</u>

<u>1931</u>	
Balance from 1930	565.58
Receipts	12,999.39
	<u>13,564.97</u>
Loan returned by State Board of Health	15,000.00
	<u>28,564.97</u>
Disbursements, 1931	12,033.13
	<u>16,531.84</u>
Loan to State Board of Health	15,000.00
Balance December 31, 1931	<u>1,531.84</u>

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ANNUAL STATEMENTS
STATE BOARD OF HEALTH
REGISTRATION OF DOCTORS, MIDWIVES, ETC.

<u>1927</u>	
Receipts	\$ 781.00
Disbursements, 1927	779.98
Balance December 31, 1927	<u>1.02</u>

<u>1928</u>	
Balance from 1927	1.02
Receipts	2,048.00
	<u>2,049.02</u>
Disbursements, 1928	930.66
Balance December 31, 1928	<u>1,118.36</u>

<u>1929</u>	
Balance from 1928	1,118.36
Receipts	2,548.00
	<u>3,666.36</u>
Disbursements, 1929	1,787.91
Balance December 31, 1929	<u>1,878.45</u>

<u>1930</u>	
Balance from 1929	1,878.45
Receipts	2,257.00
	<u>4,135.45</u>
Disbursements, 1930	3,072.77
Balance December 31, 1930	<u>1,062.68</u>

<u>1931</u>	
Balance from 1930	1,062.68
Receipts	2,333.00
	<u>3,395.68</u>
Disbursements, 1931	1,777.50
Balance December 31, 1931	<u>1,618.18</u>

ANNUAL STATEMENTS
STATE BOARD OF HEALTH
DRUG STORE INSPECTION

1928	
Receipts	\$ 3,710.00
Disbursements, 1928	2,344.27
Balance December 31, 1928	<u>\$ 1,365.73</u>

1929	
Balance from 1928	\$ 1,365.73
Receipts	5,520.00
Disbursements, 1929	6,885.73
Balance December 31, 1929	<u>\$ 5,490.06</u>

1930	
Balance from 1929	\$ 1,395.67
Receipts	6,950.00
Disbursements, 1930	8,345.67
Balance December 31, 1930	<u>\$ 5,675.81</u>

1931	
Balance from 1930	\$ 2,669.86
Receipts	7,320.00
Disbursements, 1931	9,989.86
Balance December 31, 1931	<u>\$ 9,207.69</u>

DIVISION OF MALARIA RESEARCH

All funds contributed by Rockefeller Foundation

1931	
Receipts	\$10,300.00
Disbursements, 1931	10,275.46
	<u>\$ 24.54</u>

Balance of \$24.54 returned to Rockefeller Foundation under agreement to refund any unexpended funds for each budget year.

ANNUAL STATEMENT
STATE BOARD OF HEALTH

January 1, 1932 To December 31, 1932

RECEIPTS

Balance from 1931 (Deficit)	\$ 11,898.57
Receipts from all sources 1932	214,234.75
Total	<u>\$202,336.18</u>

DISBURSEMENTS

Disbursements	\$208,179.46
Contribution of Florida Power Corp., taken from State Board of Health account and placed to credit of Leon County Health Unit (Feb.)	500.00
Deficit operating balance Dec. 31, 1932	<u>208,679.46</u>
	<u>\$ 6,343.28</u>

State Comptroller shows balance Dec. 31, 1932 of which does not embrace December bills not paid until January, 1933	\$ 16,185.64
and one November bill	443.20
Deficit operating balance as above	<u>16,628.84</u>
	<u>\$ 6,343.28</u>

ANNUAL STATEMENT OF RECEIPTS FOR 1932

First Six Months		Second Six Months	
January	\$ 17,266.58	July	\$ 12,173.48
February	15,200.55	August	22,383.87
March	18,979.02	September	16,397.27
April	31,286.55	October	13,443.59
May	6,789.46	November	19,183.99
June	13,651.91	December	27,478.48
	<u>\$103,174.07</u>		<u>\$111,060.68</u>

First Six Months	\$103,174.07
Second Six Months	111,060.68
Total	<u>\$214,234.75</u>

ANALYSIS OF 1932 RECEIPTS

Taxes	\$ 95,282.94	
Tax Redemptions	16,526.28	\$111,809.22
Transfers from General Revenue Fund		99,500.00
		<u>\$211,309.22</u>
Rockefeller Foundation	\$ 1,500.00	
Rosenwald Fund	393.75	
Florida Power Corporation	94.80	1,988.55
Refund from Drug Store Inspection	60.00	
" " Auto Ins. Premium	13.22	
" " Orthopedic Case (1929-30)	188.85	
Miscellaneous Refunds	87.07	349.14
Sale of Yeast & Immunizing Drugs		277.84
City of Tampa - Rent of Space in Laboratory		300.00
Warrant #111214 (5/16/27) Cancelled and Restored to balance		10.00
		<u>\$214,234.75</u>

ANNUAL STATEMENTS
STATE BOARD OF HEALTH
January 1, 1932 To December 31, 1932

CENTRALIZATION OF MARRIAGE & DIVORCE RECORDS	
Available balance brought forward from December 31, 1931	1,531.84
Receipts, 1932	11,629.90
	13,161.74
Disbursements, 1932	13,159.60
	2.14
Operating balance December 31, 1932	2.14
State Comptroller's balance December 31, 1932	\$959.31
does not include December bills not paid until	
January, 1933	957.17
Operating balance as above	2.14

REGISTRATION OF DOCTORS, MIDWIVES, ETC.	
Available balance brought forward from December 31, 1931	1,618.13
Receipts, 1932	2,165.00
	3,783.18
Disbursements, 1932	2,412.62
	1,370.56
Operating balance December 31, 1932	1,370.56
State Comptroller's balance December 31, 1932	21,465.56
does not include December bills not paid	
until January, 1933	95.00
Operating balance as above	1,370.56

DRUG STORE INSPECTION	
Available balance brought forward from December 31, 1931	782.17
Receipts, 1932	9,170.00
	9,952.17
Disbursements, 1932	7,516.78
	2,435.39
Operating balance December 31, 1932	2,435.39
State Comptroller's balance December 31, 1932	\$3,365.21
does not take into account December bills	\$894.21
not paid until January, 1933	
also one November bill not paid until	
January, 1933	35.61
Operating balance as above	2,435.39

DIVISION OF MALARIA RESEARCH	
All funds contributed by Rockefeller Foundation. Donations designated	
"Station for Field Studies in Malaria."	
Receipts, 1932	\$13,050.00
Disbursements, 1932	13,031.65
	18.35

The unexpended balance of \$18.35 was returned to the Rockefeller Foundation in accordance with their budget provisions.

ANNUAL STATEMENT

STATE BOARD OF HEALTH

January 1, 1932 To December 31, 1932

Disbursements by Departments and Months for First and Second Periods, 1932

	First Six Months						Total
	January	February	March	April	May	June	
Administration	2,166.38	1,918.15	2,180.21	1,970.29	1,739.71	2,070.88	12,047.62
Laboratories	3,859.08	3,826.90	3,415.57	3,330.71	2,976.75	3,275.63	20,744.64
Communicable Diseases	2,635.12	3,136.45	3,067.72	2,653.20	2,731.54	2,591.41	16,915.44
Engineering	2,612.59	3,266.17	2,753.10	2,791.65	2,663.74	2,998.85	17,086.10
Vital Statistics	5,745.16	2,911.84	2,595.19	3,101.57	2,054.73	2,307.25	18,715.74
Child Hygiene & P.H.N.	1,355.10	753.65	794.97	1,016.30	833.40	838.21	5,591.63
Biologics	1,219.86	1,923.25	3,119.82	1,890.55	1,845.50	2,691.39	12,690.37
Assistance to County Health Units	191.67	241.17	429.16	467.71	472.48	472.55	2,274.74
Malaria Control Studies	\$19,786.96	\$17,977.58	\$18,355.74	\$17,281.98	\$15,317.85	\$17,346.17	\$106,066.28
Second Six Months							
July							
Administration	1,875.77	1,680.54	2,341.85	1,933.87	2,033.38	1,988.94	11,854.35
Laboratories	3,540.95	3,036.58	3,803.94	3,557.33	3,454.55	3,575.12	20,968.47
Communicable Diseases	3,204.73	2,372.27	2,699.24	2,839.51	3,099.10	2,881.98	17,095.83
Engineering	2,641.52	3,357.05	2,526.89	2,558.64	2,898.19	2,567.89	16,550.17
Vital Statistics	2,630.52	2,530.68	2,424.36	3,186.60	2,125.80	2,256.15	15,154.11
Child Hygiene & P.H.N.	760.14	460.58	1,122.75	706.07	798.97	789.06	4,636.57
Biologics	415.86	2,229.25	2,962.39	2,004.80	2,833.53	1,295.14	11,740.97
Assistance to County Health Units	656.26	656.28	656.28	656.26	656.26	656.26	3,937.60
Malaria Control Studies	\$15,725.75	\$16,323.23	\$18,537.70	\$17,441.08	\$17,899.78	\$16,185.64	\$102,113.18
Total							
First Six Months	\$106,066.28						
Second Six Months	\$102,113.18						
Total	\$208,179.46						

ANNUAL STATEMENTS
STATE BOARD OF HEALTH
January 1, 1932 To December 31, 1932

LEON COUNTY HEALTH UNIT
(Assistance to County Health Units)

Funds are provided by State Board of Health, Leon County, City of Tallahassee, U. S. Public Health Service, Rosenwald Fund, Board of Education and Florida Power Corporation.

This report only includes moneys deposited with the State Treasurer by Leon County, Board of Education and Florida Power Corporation and disbursed through State Comptroller's office.

The Leon County Health Unit began Operations the first part of 1932.

Receipts, 1932	3,494.41
Disbursements, 1932	3,491.41
Operating balance December 31, 1932	3.00
State Comptroller shows balance as of December 31, 1932	327.19
which does not include December bills not paid until January, 1933	324.19
Operating balance as above	3.00

REGISTRATION OF MIDWIVES

Receipts, 1932	777.91
Disbursements, 1932	44.06
	733.85

Analysis of Receipts:

Fees from Midwives	769.50
Interest on Savings Account	8.41
	777.91

Analysis of Disbursements:

Refunds to Midwives	43.00
Tax on Cashier's checks for refunds	.56
Return to Midwife account over payment	.50
Balance as above	44.06
	733.85

Midwives' Fees deposited in Barnett National Bank Savings Account pending passage of Enabling Legislation to authorize expenditures of these fees, which was not provided in last act.

F. A. Brink, M. D., Director
Bureau of Communicable Diseases

During the ten year period to be covered by this summary, there has been little change in the general policy of the bureau. The aim has always been to prevent the spread of communicable disease, utilizing every available agency and all practical methods of control. An earnest effort has been made to learn of new developments and follow the procedures that have been tried and approved by recognized authorities.

PERSONNEL

At the beginning of the decade the personnel of the bureau consisted of two District Health Officers, one of whom was Acting Director, and an office secretary. On June 15, 1924, one of the District Health Officers was made Director which position he still holds. Due to resignations and sickness the bureau continued to operate with two and three District Health Officers during the remainder of the year although five were authorized. It was during this year that the immunizing work was made a major activity as a means of positive disease prevention. This work has been continued through the balance of the decade.

Due to the difficulty of procuring and retaining qualified men at the authorized salaries, there were but two to four District Health Officers on duty during 1925 until December when a salary increase was authorized and a full force was again on duty.

In 1926 an increase of personnel was provided and the force of District Health Officers was gradually increased until in November and December there were ten. From November 1926 to July 1927, with ten doctors doing field work, the bureau rendered more efficient service than at any other time in its history. The districts were smaller, less travel was required and more time could be given to the essential work. Since September 1927, there have been five District Health Officers on duty nearly all the time and this has been the authorized number.

The selection and training District Health Officers has required careful consideration. At times it has seemed best to engage men with public health experience obtained in other states and acquaint them with the procedures and health needs of Florida before placing them in the districts. A number of excellent field men have, however, been developed by taking health-minded, dependable physicians practicing in the state and giving them their training and field experience under personal supervision. In any case, before a man is sent into the field he is required to spend a few days at headquarters, get acquainted with the personnel and functions of the other bureaus, learn the policies and procedures of this bureau, the method of making daily, monthly and expense reports and then make a tour of a part of his district in company with the director during which further instructions are given.

The Director, with the advice and approval of the State Health Officer, plans the work and outlines the policies of the bureau, directs the District Health Officers, handles a large volume of technical correspondence and goes into the field for conferences, observation of the field work, special investigations and educational and communicable disease control work.

It is our policy to have the personnel of the bureau identify itself with organized medicine, attend the meetings of local societies and maintain cordial relations with individual doctors all for the promotion of mutual understanding, exchange of ideas and improvement of public health.

The chief methods used to accomplish the purpose of the Bureau - the control of communicable diseases - have been education, immunization, investigation, isolation (quarantine) and treatment.

Education: Information has been carried to the public through Health Notes, newspapers, lectures, conferences, interviews and bulletins. The newspapers have been most generous and cooperative. Their columns have always been open to all reasonable material and information furnished them for the good of their respective communities. Lectures have been delivered in schools, before civic clubs, women's clubs, parent-teacher associations, college classes and conventions of various sorts.

In 1924 a bulletin on Tuberculosis was prepared and printed. With slight changes and reprinting it has been in use and widely distributed since that time. An illustrated 4-page Hookworm pamphlet was prepared in 1926. This has been reprinted several times and is in general use. The Malaria Catechism (20 pages) was revised and reprinted in 1930. A four-page folder telling "What to do When Diphtheria and Other Diseases occur in School" is another publication of the bureau, also leaflets in Influenza, Sore Eyes and Whooping Cough.

For four years the mobile motion picture service, offering visual education in public health, has been directed from the office of this bureau. A Dolco generator mounted in a Ford truck furnishes the current, a portable projector and suitable films complete the outfit. The pictures relate to the principal health problems of the south and, accompanied by the operator's lectures, they carry the story of health to the remote parts of the state, supplementing effectively the other services of the State Board of Health.

Immunization: Vaccination for the prevention of smallpox is a procedure so well known that it need be mentioned here only to say that it has been applied by the State Board of Health with the greatest care, by the most modern method and using a virus of unquestioned purity so that the resulting 'take' would be small and harmful complications averted.

The present method of producing individual immunity to typhoid was first adopted by the U. S. Army in 1909, made compulsory in 1911 and still used, is the method used by this Bureau. It has been used extensively by us with most gratifying results. Protection of children from diphtheria by injections of a toxin-antitoxin mixture came into general use about 1920 and by 1923 its value became widely recognized. It was at this time that the practice was started in Florida and in 1924 it was adopted as a routine procedure by this bureau. A means of separating immune from non-immune children by means of the Schick test had been provided and many children have been protected by first testing, then giving the treatments to the non-immune. Toxoid has recently been substituted largely for toxin-antitoxin. This immunizing has been done mainly in the schools because here the children were easily reached under suitable conditions. Special clinics for this work have been organized when needed, that is, when certain diseases appear in a community and the people are moved to accept the service.

Our objective in starting the program of immunization was to demonstrate the safety and usefulness of the procedure, particularly that for diphtheria control. This has been accomplished as shown by the absence of bad results, the absence of diphtheria in treated children and a consistent decline in the diphtheria death rate. Difficulty has been experienced in getting people to go to their own doctors for this service so that we might relinquish the work entirely to them.

Investigation: It is often possible, by making a careful epidemiological study of each case of infectious disease in a community, to determine with a fair degree of certainty, the source from which the infection has been acquired. This knowledge is then used in applying effective control measures. For the control of diphtheria it is customary to take cultures from large numbers of children who have been associated with a child having the disease. Carriers are thus found and isolated. By learning the source from which a number of typhoid patients have obtained their water, milk, vegetables, shellfish and other foods, it is often possible to trace the infection to its source and prevent further spread.

Isolation: This term has taken the place of the word "quarantine". It means the separation of a communicable disease patient and his infected surroundings from susceptible persons in such a manner that others may not contract the disease. Application of proper isolation methods requires a knowledge of the means by which diseases are transmitted. It is the duty of each District Health Officer to give suitable instructions to the attendants of each communicable disease patient regarding disposal of discharges, use of disinfectants, visiting, exclusion of insects and the time of terminating the period of isolation.

Epidemics of a serious nature have for the most part been prevented. Making due allowance for the natural climatic advantages of the state, credit must be claimed for the intelligent and energetic work of the State Board of Health personnel in the discharge of their duties.

The only major epidemic of the period was one of smallpox in 1926 (2,890 cases reported) and 1927 (1,356 cases reported). At this time a large portion of the population was susceptible, there having been few cases of the disease and consequently few vaccinations during the preceding years. There was also a most unusual amount of travel into and throughout the state during these two years. During the two years more than 60,000 persons were vaccinated by the personnel of the bureau and an unknown but probably much greater number were vaccinated by private physicians, using vaccine furnished by the State Board of Health.

Note: A periodical outbreak of smallpox is inevitable when vaccination of a population is neglected for a period of years. All children should be vaccinated before entering school.

Treatment is rarely applied by the State Board of Health. This is felt to be a function of the practicing physician whose field is invaded only on rare occasions and under special conditions. When the treatment of the patient is an important control measure (as in venereal diseases and malaria) it is provided, if possible, through local doctors.

Venereal Disease Control: Ten clinics for the free treatment of venereal patients, opened during the war and operated by as many local doctors were continued until June 30, 1926. These were financed jointly by the State Board of Health and the U. S. Government and they did splendid work at small cost.

During the operation of the clinics, nearsphenamine for intravenous treatment of syphilis was furnished to the clinicians. Subsequently it has been furnished to private physicians for the treatment of indigent syphilitics. Due to lack of funds it has not been possible to give adequate support to this type of work.

COUNTY HEALTH UNITS

With the aid of the personnel of the U. S. Public Health Service and a substantial cash contribution, three county units have been organized as follows:

The Taylor County Unit began to function on September 1, 1930. The Leon County Unit began on January 1, 1931. The Escambia County Unit began March 1, 1932. After June 1, 1931, the State Board of Health contributed a substantial amount to the budget of each Unit and the Public Health Service continued its support with slightly diminished allotments.

These Units render locally the services that would otherwise come from the state and they render it more completely because the personnel is more nearly adequate for the area and population served.

The promotion, direction and supervision of these units is now a duty of the Director of this Bureau.

REPORTS

A considerable amount of labor is involved in handling the reports that come in to and others that are prepared in the office.

Daily and monthly reports and monthly expense statements are received from the District Health Officers, the Tuberculosis Clinician and Nurse and the Motion Picture Operator. Each County Unit renders a weekly narrative report, a monthly report of disbursements and a quarterly progress report.

All morbidity reports are received and tabulated in the office, weekly summaries published and distributed to proper authorities.

Table No. 2 shows the number of cases of certain communicable diseases reported to the State Board of Health during the decade. Reporting is admittedly incomplete but it does afford a fair index of the prevalence of the more important diseases.

A monthly narrative and an annual report are prepared for the State Health Officer and the board members.

Table No. 1 is intended to show in a greatly condensed form the volume and variety of work done by the District Health Officers. Although this table may not accomplish what is intended, it represents a great deal of labor and assurance can be given that faithful service has been expected of and rendered by the field force.

	Activities during 1923-1932, both inclusive											
	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932		
Interviews and Conferences	3267	3623	2294	8604	6722	4225	3264	4474	6397	7746		
Public Addresses	222	466	185	692	607	415	310	467	691	821		
Newspaper Articles	48	56	46	83	118	52	92	121	198	169		
Schools Visited	257	658	386	1698	1997	1549	1522	2040	2140	2809		
Clinics Attended	44	131	66	90	626	1223	1420	1391	1809	2698		
Persons Examined	8962	28682	8581	3084	12986	12807	22262	13897	6703	10769		
C. D. Investigated	566	669	161	1890	1612	775	518	740	1017	1135		
Cases Isolated or Excluded	162	434	141	861	577	672	303	477	659	572		
Houses Placed	34	39	6	245	234	105	74	134	293	73		
Smallpox Vaccinations	2289	2603	1014	41410	22665	8588	5482	6520	11276	17325		
Typhoid Inoculations	792	824	6097	21431	43301	46327	38862	37268	55409	94160		
Schick Tests	3329	4335	4022	23406	25145	17210	14880	19025	19889	21000		
Toxin-antitoxin Given	685	1206	2064	22275	23462	23902	18781	18357	23865	21439		
Throat Swabs	653	182	683	847	1470	822	857	1566	4538	2605		
Other Specimens	58	171	25	17	160	232	1659	2654	2789	2948		
Hookworm Treatments								2687	1144	2100		
Tuberculin Tests								334	2798	10769		
Malaria Smears		52						713	57	3146		
Quinine Treatments								721	146			

TABLE NO. 2

Number of cases of certain communicable diseases reported to the State Board of Health, 1923-1932, both inclusive:

	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932
Typhoid	605	638	746	639	587	327	172	140	183	266
Typhus	0	4	3	16	45	49	48	39	31	42
Malaria	1070	1030	665	400	360	844	1535	576	339	318
Smallpox	228	117	206	2890	1356	156	36	28	27	33
Measles	2896	3244	128	1126	2582	1709	1117	5287	3779	217
Scarlet Fever	94	155	175	459	501	376	351	341	266	235
Diphtheria	619	681	768	1224	1095	588	580	491	501	735
Influenza	994	345	761	1213	481	1631	3769	104	1543	335
Poliomyelitis	15	8	59	16	39	23	33	11	17	8
Encephalitis	3	8	11	6	10	4	7	3	1	1
Tuberculosis	1210	1573	1463	1335	1107	943	762	487	511	591
Syphilis	2090	5066	5736	3509	4955	4307	4273	4199	3965	4063
Gonorrhea	1423	2816	2670	1495	1426	882	828	802	714	713
Pellagra	96	126	136	42	74	84	66	51	64	60
Undulant Fever	0	0	0	0	0	0	8	4	3	2
Tularemia	0	0	0	0	0	2	4	1	2	2

TABLE NO. 3

Number of pamphlets distributed by the Bureau of Communicable Diseases 1924-1932, both inclusive.

	1924	1925	1926	1927	1928	1929	1930	1931	1932
Manpower	2924	928	215	829	938	664	2513	758	248
Outdoing the Ostrich	1750	936	229	255	332	624	6		
Sex Education in the Home	1815	838	519	789	679	1030	355	210	287
Keeping Fit	3467	1437	338	1176	2349	3738	3739	390	393
The Girl's Part	2808	1088	320	2226	922	963	2100	388	389
Healthy Happy Womanhood	1818	1014	266	491	2946	3876	3249	283	381
Sex Education in Schools	208	555	210	771	635	995	1485	234	305
Citizens Against Prostitution	141	177	220						
How to Fight Venereal Diseases	492	247							
Syphilis Information	476	800	742	295	147	110	150	0	165
Gonorrhea Information	3888	395	931	292	97	110	150	0	165
Sanitary Code	5425	212	42	33	25	19	10	7	
Tuberculosis	6379	2258	577	1022	1015	4841	4219	3850	1895
Typhoid	85	1428	887	2027	395	886	1660	1879	341
Malaria	2715	2126	455	1136	511	1832	7130	4921	2440
Hookworm	2735	5934	20077	17355	4515	7557	14767	11263	8675
Scarlet Fever-Measles	1349	1060	663	421	226	781	120		
Rabies	4947	310	225	83	63	6			50
Cancer	4029	58	34						
Pellagra	2959	269	125	283	670	339	54	389	455
Diphtheria	628	214	2156	2547	1410	6660	6470	3739	2589
Smallpox	663	219	1969	2811	618	3889	770	2874	1730
Whooping Cough	745	77	13	531	168	599		285	120
Sore Eyes		238	3944	465	764	272	1890	1149	250
What To Do When		38	9515	4852	1656	3268	2190	4384	4235

TABLE NO. 3 - Cont'd

	1924	1925	1926	1927	1928	1929	1930	1931	1932
Influen									
Influenza				158	70,091	3693	3430	440	155
Fly	1280	1429	217	52	163	68	15		500
Mosquito	725	659	196	61	105	53	55		50
Sanitary Privy	275	2105	422	22	55	70	25		
Mosquito Campaign	68593	265	12						50

CURATIVE MATERIALS DISTRIBUTED

Year	Neocarsphenamine Ampules	Yeast lbs	Quinine 3gr. 5 gr.
1924	4,069		
1925	5,556		
1926	6,000		
1927	0		
1928	0		
1929	300		
1930	870		10,000 75,000
1931	1200	600	73,000
1932	930	1530	

1932 ANNUAL REPORT
BUREAU OF COMMUNICABLE DISEASES

Personnel

F. A. Brink, M. D., Director
Myrtle McLendon, Secretary
W. A. Claxton, M. D., Tuberculosis Clinician
Mary Dodd, R. N., Nurse for Tuberculosis work.

District Medical Officers

Thos. E. Morgan, M. D. - District No. 1
Columbia, Baker, Nassau, Duval, Union, Bradford, Clay, St. Johns, Alachua,
Gilchrist, Putnam, Levy, Marion, Flagler.

C. W. Pearse, M. D. - District No. 2
Volusia, Lake, Seminole, Orange, Osceola, Brevard, Okeechobee, St. Lucie,
Indian River, Martin, Palm Beach, Broward, Dade.

A. C. Hamblin, M. D. - District No. 3
Citrus, Hernando, Sumter, Pasco, Pinellas, Hillsboro, Polk, Manatee, Hardee,
Sarasota, DeSoto, Highlands, Charlotte, Glades, Lee, Hendry, Collier.

H. A. McClure, M. D. - District No. 4
Franklin, Liberty, Gadsden, Leon*, Wakulla, Jefferson, Madison, Taylor*,
Hamilton, Lafayette, Dixie, Suwannee.

C. W. McDonald, M. D. - District No. 5
Escambia*, Santa Rosa, Okeechobee, Walton, Holmes, Washington, Jackson,
Bay Calhoun, Gulf.

*Served by County Health Unit.

There was no change in the personnel of the Bureau during the year and no loss of time except that one District Medical Officer had a month's leave without pay.

Epidemiological Investigations

Wherever any considerable number of communicable disease cases were reported in a community, an investigation into the possible source of infection was undertaken. Pertinent facts regarding each case were gathered and correlated and from these studies it has been possible in numerous instances to determine with some accuracy the source of infection and to formulate plans for preventing further spread.

The direct spread of infection to contacts in the home has been prevented in many instances by the application of measures known to be effective. Besides sanitation and screening these consist of isolation in the home (or hospital), concurrent disinfection, disposal of discharges and instruction of attendants in the proper technique. Immunization of contacts has been insisted upon and has been quite readily accomplished.

A number of typhoid patients were found to have eaten oysters raw from condemned beds and this is believed to have been the source of their infection. These findings have strengthened and supported the position of the State Board of Health in its efforts to prevent the sale of oysters from polluted waters.

In one instance the blame for six typhoid cases was placed on a small dairy and the trouble seemed undoubtedly to be due to contaminated bottles returned to the dairy from the original case.

Most of the typhoid cases reported during the year were scattered over the state more or less remote from other cases and the exact source of infection was undetermined though presumed to be from unknown carriers through flies, food and personal contact.

The immunization program of previous years, carried out mainly in the public schools, was continued through those parts of the year when schools were in session. A few special clinics were arranged for immunizing pre-school children and these met with varying success. A few were very well patronized but the results, on the whole, have not been encouraging. It is difficult to get parents interested enough to bring the children and it is more and more evident that this service should be rendered by a local health agency or, better still, sponsored and carried out by practicing physicians. With that end in view cards were printed, (revised from a previous form), bearing in conspicuous letters the following:

IS YOUR CHILD PROTECTED AGAINST

D I P H T H E R I A

S M A L L P O X

T Y P H O I D

SEE YOUR DOCTOR

HENRY HANSON, M. D.
STATE HEALTH OFFICER

STATE BOARD OF HEALTH
BUREAU OF COMMUNICABLE DISEASES

These were for posting in doctors' offices and many of them have been placed. The results of this are not easily determined but it should help to keep diphtheria in the public mind and bring about a discussion between the doctor and his patients.

Although active immunization to diphtheria takes longer than that for typhoid and smallpox, the injections have been extensively given to children exposed and those presumed to have been exposed so that their future might be more secure. Large numbers of cultures have been taken from school contacts and others. By this means numerous carriers were detected and isolated. This procedure, coupled with the continued program of immunizing, has prevented anything resembling an epidemic. Although there was an increase in the number of cases and deaths from diphtheria over 1931, 81% of the children who died were under six years of age and, therefore, not within reach of the school clinics. This is noted particularly to emphasize the need of getting the younger children immunized. This increase in diphtheria clearly indicates the need of increasing our efforts so that the good record of recent years may be continued.

With the present facilities for reaching and immunizing the pre-school children, no marked progress is to be expected unless it be through inducing local agencies to assume the responsibility or through a marked increase in the educational program actively supported and aided by local doctors so that the children may be treated by the local doctors.

Dried brewers yeast in two-pound packages has been distributed to pellagra patients on the request of their physicians. Of this product 765 packages have been handled, 373 were sent free to indigents and 392 were sold at 50¢ per package which amount covers the cost and postage.

Vonereal disease control activities have consisted of distributing educational material, answering inquiries and furnishing nearsphenamine to practicing physicians for the free treatment of their indigent patients. A total of 930 doses were thus furnished and 190 doses were sold at cost to contract doctors who were thus enabled to treat syphilitics not otherwise provided for.

The program for the study and control of tuberculosis is under the able guidance of the clinician, who was assisted by one nurse detailed to help with the conduct of clinics and, so far as possible, follow the recognized cases into the homes to give advice and teach the application of protective measures. The detailed report of this activity, prepared by Dr. Claxton, is attached. It is quite obvious that little more than a demonstration could be expected from two workers endeavoring to distribute their services over the State of Florida. Yet much has been accomplished through the cooperation of physicians and others. In the educational phase of this service lies its greatest value. Without the aid of the Florida Tuberculosis and Health Association and its local, county representatives, the program could not have been carried out with anything like the degree of success that was attained.

While the health education work of the bureau has been general, it has had for its chief aim the control of communicable diseases. Every available means of reaching the public has been used including health talks in schools, public addresses before civic clubs, parent-teacher associations, women's clubs, etc., newspaper articles and the monthly contribution to Health Notes.

MOTION PICTURES

Our motion picture educational service has been well received, particularly in rural areas. Showings are given largely in the public schools afternoons and evenings. Silent pictures are shown which teach the cause, manner of spread and means of preventing communicable diseases, particularly tuberculosis, diphtheria, malaria and hookworm. The operator maintains interest and improves the value of the pictures by explaining while they are shown. There are many children and illiterate adults who cannot follow the titles and explanations as they are thrown on the screen. The films, projector, Delco generator and light motor truck are given the best of care by the operator. It is possible to show the pictures in any building though not provided with commercial electric current, they are even shown in the open air on many occasions. This service dovetails very nicely into the work of the District Health Officers who find a much more intelligent acceptance of the services they offer if preceded by the pictures. The total number of showings during the year was 291 and the total attendance was 72,686.

A large volume of correspondence is handled in the office. This covers many phases of public and personal health and involves answering many inquiries some of which are but remotely related to the subject.

PHYSICAL EXAMINATION OF SCHOOL CHILDREN

The number of physical examinations of school children has been limited by press of other work. Unless provision is made for correcting the defects that are found these examinations are looked upon with disfavor because they only interfere with school routine and consume the time of the examiners. It has, moreover, been our policy to encourage school authorities to get the examinations made by local doctors so that the District Health Officers may devote more of their time to preventive work.

The ever present hookworm problem has received its share of attention. The service of the laboratories has been augmented by the number of specimens for diagnosis submitted by the field men and the number of infestations found in certain schools found to be 100% including the teacher. Contrary to our wishes and the general policy of the bureau, a considerable number of treatments have been given by the District Health Officers. This has been authorized only when the children could not be gotten to the local doctor and the procedure had been approved by him. Our experience confirms the belief of the State Health Officer that this is one of our major problems deserving much greater attention. Always in this connection the preventive value of sanitation is stressed with results that are not too satisfactory.

The cooperation of practicing physicians in carrying out the communicable disease control program of the bureau is gratefully acknowledged. The members of the staff have frequently referred to their cordiality and ready response to all requests for assistance, advice, information and moral support.

By calling on local physicians as frequently as possible the Bureau members have endeavored to merit their confidence and good will and to benefit by their knowledge of local conditions.

There is no material difference in the kind or proportionate amount of service rendered to whites and negroes. There is a great deal of intermingling between the races which gives abundant opportunity in the home for contagion and the protection of either race will benefit both. Smallpox spreads rapidly among non-immune negroes and it is interesting to note that colored children can be Schick tested as readily as white and, though negro children seem somewhat less susceptible to diphtheria, cases and carriers are found among them.

Much poverty has been occasioned by the depression and unusual calls have been made on the District Health Officers for medical and financial aid. It is difficult at times to convince applicants that the state health doctor cannot take care of them but the policy to restrict activities to public health has been adhered to most creditably. Our aim is to avoid encroachment into the field of medical practice and, though there may have been deviations, they have usually been made in order to render first aid or temporary medical relief and have been commendable.

COUNTY UNITS

The cooperative program of rural health service, conducted on the county unit plan has been one of the Communicable Disease Bureau's responsibilities and, though there were but three units in operation during the year, it is rather remarkable that one of these was organized during a time of retrenchment. The Pensacola-Escambia County Unit began to function on March 1, 1932. At the close of the year the Taylor County Unit had been in operation for two years and three months; the Leon County Unit for two years.

The reports of these units which are attached indicate quite clearly their functions.

The Health Units are financed jointly by the State Board of Health, the U. S. Public Health Service and the counties in which they operate. The City of Pensacola participates in the support and benefits of the Escambia County Unit; Tallahassee, likewise, contributes to the cost and enjoys the services of the Leon County Health Unit which also received financial aid from the county school board, the West Florida Power Company and the Rosenwald Foundation.

<u>County Health Units</u>						
	<u>Date</u> <u>Organized</u>	<u>Budget</u> <u>per</u> <u>Annum</u>	<u>Phy-</u> <u>sicians</u>	<u>Nurses</u>	<u>Inspec-</u> <u>tors</u>	<u>Clerk</u>
Taylor	Sept. 1 1930	\$9,000.00	1	1	1	1
Leon	Jan. 1 1931	18,467.00	1	2	2	1
Escambia	March 1, 1932	16,892.00	1	2	5	1

Throughout the year there has been nothing more gratifying than the active promotion and support that was given to the Escambia Unit by the County Medical Society. Without the backing of this society and the active participation of its health committee in promoting, organizing and sustaining the unit, it could not have survived or even come into being. There has been strong opposition to the program and the personnel from a few individuals who, apparently for personal reasons, made a decided effort to disorganize the unit. Led by the physicians many of the substantial citizens voiced their approval of the health work, the newspapers gave it dignified recognition and its enemies failed in their effort.

This report would not be complete without a word of commendation for each member of the staff. Everyone of them has shown a remarkable degree of unselfish interest in the cause of public health in Florida and each has had a large part in maintaining the standards of service and in holding communicable disease incidence at a remarkably low level.

Table No. 3 (2nd page) shows the distribution of certain curative products by this bureau; namely, neocarsphenamine for treating syphilis, quinine, three and five grain capsules for malaria control and yeast for pellagra patients. These products have been furnished principally to the indigent and usually through or on recommendation of a local doctor.

Following are the reports of the Tuberculosis Clinician and the three County Health Officers.

TUBERCULOSIS DIVISION
W. A. Claxton, M. D., Clinician

Active measures for the clinical diagnosis and control of tuberculosis by the State Board of Health began in 1930. Before this time the Florida Tuberculosis and Public Health Association held diagnostic clinics in a few centers and encouraged "Early Diagnosis Clinics" through local branches of that organization. Regular clinics had been established at Miami, Jacksonville, and Tampa. In May 1930, the State Board of Health began a series of clinics which were held at Pensacola, Quincy, Ocala, Dade City, New Port Richey, Kissimmee, Bradenton, Sarasota, Fort Myers.

Summary of work done

Number of persons attending clinic	1008
Number of tuberculin tests done	606
Number of tuberculin tests read	473
Number of positive reactions	54 (11.4%)
Number of physical examinations	706
Number of cases tuberculosis found	42 (5.9%)

During 1931 a more extensive program was planned. Clinics were held at fourteen towns on the East Coast from Key West to Daytona. At these clinics 2,563 tuberculin tests were done and 324 persons given a physical examination. Twenty-four adult cases of tuberculosis was discovered. Besides this, in the fall of 1931, tuberculin tests were made on the school children of LaBelle.

At the beginning of 1932 a tuberculosis clinician and nurse were assigned to full time duty. Our program has consisted of two main divisions of activity; namely, tuberculin testing of school children and clinics for chest examination of adults.

In tuberculin testing we made a complete survey of school children in five counties Marion, Lake, Seminole, Nassau and Leon. We tested 5,181 white and 4,290 colored children of ages ranging from five to 20 years. Among the white children we found 11.8% infected while among the negroes 18.4% were infected. This shows that there is one and one-half times as much tuberculous infection among colored as among white children. This infection rate of 11.8% among white school children is low as compared to North Carolina's 19%, New York's small town rate of 25% and Massachusetts rate of 30%.

The amount of infection in a community or state depends on the closeness of contact among the people of that community and larger cities always show a larger percentage of infected children. In our Florida climate this close contact is not so marked hence less infection. Casual or chance infection from one exposure on the street or in public gatherings is not so apt to produce tuberculosis as a disease as continued contact with an active case of tuberculosis in a family so our efforts should continue along the line of discovering these active cases and preventing contact between them and growing children.

Our program of tuberculosis control is handicapped by the difficulty of obtaining X-ray examinations of the chests of tuberculin positive children. This is the only way in which a diagnosis can be made. Georgia, Tennessee, North Carolina, Alabama and other southern states have either mobile X-ray machines which can be carried to clinic centers or have arrangements to carry children to the state sanatorium for X-ray examination.

The handicap of doing control work on children without X-ray facilities is so great that there is not much use of doing wholesale tuberculin tests in a county unless the tests can be followed by X-ray examinations on the tuberculin positive children. Any tuberculosis control program is handicapped without tuberculin testing in the community and such authorities as Opie and Aronson have shown that this is one of the most important phases of all tuberculosis work both from the standpoint of discovering hidden adult tuberculosis and in early diagnosis of the disease in children. Besides the tuberculin testing in the five counties mentioned above which was used as a basis for obtaining statistics on the rate of infection in the state, groups of children were tested in Polk, Manatee, Volusia, Lee and Hendry counties.

The adult clinics were held in the following fifty-two towns and cities in forty-two counties of the State: Apalachicola, Arcadia, Belle Glade, Bonifay, Bradenton, Bushnell, Century, Clearwater, Cocoa, Crestview, Dade City, DeFuniak Springs, DeLand, Daytona Beach, Eustis, Fort Myers, Fort Pierce, Fernandina, Gainesville, Green Cove Springs, Kissimmee, LaBelle, Lake City, Lakeland, Lake Wales, Leesburg, Live Oak, Madison, Marianna, Monticello, Mt. Dora, New Smyrna, Ocala, Orlando, Pahokee, Palatka, Pensacola, Perry, Quincy, St. Augustine, St. Cloud, St. Petersburg, Sanford, Sarasota, Starke, Stuart, Tallahassee, Tampa, Tarpon Springs, Wauchula, West Palm Beach and Williston.

At these clinics, 884 white and 399 colored persons were examined. Seventy-five white and twenty-six colored persons were found to have tuberculosis. Analyzing the findings on white persons it was noted that of those examined 513 were born in Florida, while 371 were born in other states or counties. Among the 513 born in Florida, 34 or 6.6% were found to have tuberculosis while among the 371 not born in Florida 41 or 11% were found to have the disease.

It is rather difficult to draw definite conclusions from this variance in findings one might hazard the opinion that the larger percentage of tuberculosis among patients from other states was due to people coming to Florida with tuberculosis of which they may or may not have been cognizant or we might say that persons from other states being more accustomed to such Board of Health clinics were more prone to avail themselves of these facilities for diagnosis of their illness.

Among the 399 negroes examined 26 were found to have tuberculosis. The 179 born in Florida yielded 12 cases of tuberculosis (6.6%) while 220 born in other states revealed 14 positive cases (6.3%). Here as can be seen the difference is so small as to be negligible as most of these negroes lived in other southern states under the same conditions as the Florida born and as their training and education are about the same we would expect this similarity of findings.

Besides the diagnosis of tuberculosis enumerated above the following diseases conditions were found in the patients presenting themselves at our clinics:

Disease	White	Colored	Total	Disease	White	Colored	Total
Bronchitis	149	36	185	Heart Disease	52	14	66
Bronchiectasis	9	-	9	Enlarged Thyroid	14	2	16
Lung Ulcers	1	-	1	Enlarged Tonsils	104	42	146
Pleurisy	1	1	2	Adenoids	5	1	6
Empyema	3	-	3	Pyorrhea	127	64	191
Asthma	12	7	19	Decayed	70	27	97
Sinus Infection	15	1	16	Pellagra	13	-	13

The State Tuberculosis and Health Association under the directorship of Mr. Sherwood Smith with its numerous county branches has been most generous in assisting our work by helping to arrange our itinerary. Employing field workers to do preliminary and follow up work and by furnishing X-ray plates for use on indigent patients.

Public Health Nurses in the towns and counties visited have cooperated enthusiastically as have school principals and county school superintendents. Members of the State Federation of Women's Clubs have given valuable assistance when called upon. There is much more to be done in tuberculosis control work. One of the things to be done is to correct the impression that tuberculosis cannot be cured in Florida. The statistics from the tuberculosis work of the Jackson Memorial Hospital at Miami under the direction of Dr. M. Jay Flipse, the County Sanatorium at Tampa under Dr. A. F. Higgins, the County Sanatorium at St. Augustine under Dr. J. M. Irwin and other places are continually demonstrating that tuberculosis can be cured by proper rest in bed.

Among patients treated in home: A young woman in Starke contracted tuberculosis, went to bed for a year, gained 50 pounds, had her disease arrested and is doing light housework. A young man in DeLand with a definite diagnosis of tuberculosis was put to bed. He also gained 50 pounds, his temperature became normal and he is on the road to recovery. A woman in DeLand treated by the same physician, Dr. W. A. Pay, is also showing satisfactory improvement and can be back at her housework in a short time. A woman in Bradenton came from Georgia 10 years ago with hemorrhages and positive sputum; a far advanced case of tuberculosis weighing 90 pounds, she now weighs 157 pounds, does most of her housework and will probably die from some other cause. It is purely a matter of making contact with people who have tuberculosis examining them, outliving a proper regimen of "cure" and assisting in directing their treatment. This aid is welcomed by the practicing physicians most of whom frankly state that they appreciate the advice given at the tuberculosis clinics.

U. S. Public Health Service
State Board of Health Cooperating

1932 ANNUAL REPORT

TAYLOR COUNTY HEALTH UNIT

A summary of the work done by the Taylor County Health Unit for the twelve months period from January 1, 1932 to December 31, 1932.

CHILD HYGIENE:

Advice and Home Visits

There have been 152 expectant mothers given advice, 12 midwives instructed at 18 classes, 9704 children instructed concerning their physical health (all children being lectured more than once) and 2078 home visits have been made by the nurse.

Examinations

Two hundred forty one infant and pre-school children and 2410 school children have been examined. One hundred fifty nine of the infants and pre-school and 1849 of the school children were found defective, with a total of 3094 defects. One hundred thirty two children were excluded from school for some contagious disease until free from such disease. Two hundred sixty one drills in hygiene were held. Pre-school clinics were held at the following places: Foley, Perry, Shady Grove, Pine Grove, Covington, Oakland, Pine Level, Stephensville, Carbur, Athona, Boyd, Fenholloway and Pisgah.

Health Classes

Five classes were held at each of the following schools: Perry (with an average of 104 girls attending), Shady Grove (31 attending), Cabbage Grove (23 attending), Foley (30 attending) and Carbur (26 attending). These classes were in: (1) Personal Health. (2) Home Health. (3) Infant Care. (4) Communicable Disease (stressing hookworms and malaria), and, (5) Community Health and First Aid.

COMMUNICABLE DISEASES:

Twenty seven cases of contagious diseases have been quarantined, entailing 198 visits by the physician and nurse.

Diphtheria

Seven hundred sixty three people were tested for diphtheria susceptibility, 70 were found susceptible and 144 were protected against this disease. This includes the non-tested preschool children. Ninety seven nose and throat cultures for diphtheria germs have been taken.

Hookworms

Two thousand three hundred sixty three specimens were examined for hookworms, with 1162 having hookworms and 996 were treated under the supervision of the director. The positive cases of hookworms were 49.17% in 1932 as compared with 57.21% in 1931. 19.38% of all children that have been tested, treated and then tested again have been shown to be negative for hookworms.

Malaria

Fifty eight thousand five hundred eighty one (58,581) five grain capsules of quinine were distributed to 1228 people at 23 clinics in the county. Approximately 12.5% of all homes in the rural section have been screened. Almost 10% of these were during the year 1932. During the year of 1932 the malaria index as shown by spleen examination of school children under twelve years of age was 20.88% as compared with

Smallpox

Eight hundred fifty one people were protected against smallpox.

Tuberculosis

There were 72 people examined for tuberculosis with 5 having been found to have this disease. Two chest examination clinics were held by the tuberculosis clinician of the State Board of Health. There have been three deaths from this disease. Each active case is being visited regularly by the physician and nurse in order to assist the family physician in the cure of the victim and to prevent infection of other members of the family. Two hundred forty one home visits have been made.

Clinic

An orthopedic clinic was held during the year when 42 crippled children were examined by the Orthopedic Surgeon for the Crippled Children's Commission. Some of these will receive surgical correction during the next year.

CORRECTIONS

There were 226 sanitary toilets built (these include three types: new sanitary pit toilets, privies restored to sanitary type and septic tanks) and two new sewer connections installed. Three new water connections were found installed. There were 66 samples of water collected and sent to the State Board of Health for analysis. This included water for drinking and that from swimming pools. Four dairies showed marked improvement and two swimming pools were improved. The drug stores, under a new sanitary drinking cup ordinance, have shown marked improvement. Ten sanitary nuisances were corrected, the most important of these being the cleaning of Spring Creek below the city sewage outlet. This creek had become badly obstructed and was in a deplorable state. Part of Rock Creek was also cleaned of obstructions. This creek was a heavy malarial breeder. One hundred eighty six dwellings and 18 sleeping quarters have been screened against flies and mosquitoes. Eight hundred twenty one defects in school children and 40 in pre-school children have been corrected, with 165 school children being 100% in health and 83 of them being blue ribbon children.

DEMONSTRATIONS

Fourteen demonstrations in toilet building and one in screening have been held.

EDUCATIONAL

There have been 3804 circulars distributed throughout the county. These have varied from the care of the hair to the care of the feet. There have been 90 posters put up announcing the various clinics to be held.

BLUE RIBBON PROGRAMME

A gold star, blue ribbon program was held at three schools and a gold star program only was held at four schools. A child who had no physical defects and who had taken the protective treatments against typhoid fever, diphtheria and smallpox and who had submitted a specimen to be examined for hookworms, and who had taken the hookworm medicine, if he or she had hookworms, was given a gold star. If the daily health habit chart was kept for six weeks (this chart requires the child to carry out the essential health habits and must be signed by his or her parent) and his or her academic work was good, a 100% health button with a blue ribbon and a health certificate showing physical excellence were given. If the child did not carry out the health chart, then a 100% health button was given. A health banner was presented to the one and two teacher schools and one to the three or more teacher schools, who had the largest per cent of gold star children to their average attendance. The pennants were won by two rural schools. The room in each school that had the largest number of gold stars was given a prize of either a book or a picture. A health play preceded the awarding of the blue ribbon certificates and blue ribbons in Perry school.

This depicted the essential health habits. A graduation program, which included a Maypole dance, followed the giving out of blue ribbon certificates at Foley School. A speech was made at each school when the 100% buttons or the certificates and 100% buttons were given out.

TOOTHBRUSH DRILL

A tooth brush drill was held at Perry schools with 400 children of the first four grades participating. This drill depicted in song and pantomime the correct method of brushing teeth. A motion picture on correct method of brushing teeth preceded all practices. A still picture of this drill was taken. Each child unable to buy a tooth brush was given a free one donated by one of the local civic clubs and each child was given a free sample of tooth powder.

SANITATION

There were 1065 inspections of private premises, 410 of public premises, including all food handling places, and 57 inspections of dairies (a monthly inspection being made at least, and oftener if necessary). All food handling places, including drug stores, were inspected regularly. The sanitary officer has dipped for mosquito larva numerous times throughout the county and, with the exception of places where dusting was being done anopholene larvae were found. One pool has been stocked with top feeding minnows. Dusting has been done at the following places: Boyd, Wilson Lumber Company, Burton-Swartz, Perry and Foley.

One hundred forty two milch cows in the four dairies were tested for undulant fever and 50 out of the 142 were found to be reactors.

Sanitary cement drinking fountains were built at three of the consolidated rural schools during 1932.

Approximately 14.10% of all rural homes have had a sanitary toilet built. 10.50% of these were sanitated during the year 1932.

29.12% of physical defects in school children were found corrected during 1932 as compared with 9.98% in 1931.

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TREASURY DEPARTMENT
U. S. PUBLIC HEALTH SERVICE
STATE BOARD OF HEALTH COOPERATING

Tallahassee, Florida

January 1, 1933

1932 ANNUAL REPORT

LEON COUNTY HEALTH UNIT

TO THE OFFICIALS OF THE STATE BOARD OF HEALTH, LEON COUNTY, CITY OF TALLAHASSEE AND
OTHER CONTRIBUTING AGENCIES:

We herewith submit the following report of the activities of the Leon County Health Unit for the year 1932:

EDUCATIONAL:

During the year 102 health talks were made to approximately 5,600 people; 5,560 pieces of literature were distributed; 51 newspaper articles were written; the motion pictures of the State Board of Health were shown for ten days; one health exhibit at County Fair; and numerous conferences were held by all members of the Unit on the various phases of public health.

INSPECTION, SANITATION, MOSQUITO CONTROL WORK, ETC.

In addition to the inspections made by the regular City and County Inspectors, a systematic house-to-house inspection has been maintained throughout the year, requiring from one to three men. A total of 72,701 inspections of private premises were made in the interest of sanitation and mosquito control work. 1,389 inspections of public places were made; 721 inspections of dairies; and 244 inspections of oyster dealers and other food handling establishments.

COMMUNICABLE DISEASE CONTROL:

During the year 118 visits were made to cases or suspects and 34 cases quarantined. Excepting the outbreak of influenza near the end of the year, no other epidemic of importance occurred in the County. Only one known case of typhoid occurred in the County outside of Tallahassee and only a few in the City.

VENEREAL DISEASE CONTROL:

All during the year the physicians treated gratis a number of venereal cases who would furnish their own medicine; the Health Unit would order the neoarsphenamine for these semi-indigent cases at cost. In September a cooperative clinic to treat the colored syphilitic cases was started at the A. & M. College Hospital, since that time 173 treatments have been given. 539 specimens of blood for Kahn test have been taken by the Health Unit during the year.

TUBERCULOSIS CONTROL:

Tuberculosis is not regarded as a serious problem in this County. 2,793 tuberculin tests were made, practically all on school children and approximately equally divided among the white and negro children. 10% of the white children and 19% of the negro children gave positive reactions. Numerous home visits were made to determine the source of infection, but the results were not encouraging as in a majority of the cases no contact could be traced. Fourteen children who were suspects were examined by the State Chest Clinician but no evidence of active tuberculosis was found.

The nutritional work among the underweight school children can be properly included under preventive tuberculosis work. The nurse conducted these classes in the various schools enrolling 277. The children were weighed each week and were given such instructions in health habits as the nurse deemed advisable. Practically all

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of the children made satisfactory gain in weight and the teachers expressed themselves as being well pleased with the results. These classes were continued on through the summer, the children at the health office once each week. During the latter part of last school year the Woman's Club furnished 53 pints of milk each day to the indigent underweight school children. By the beginning of the present school year all of the civic clubs, Churches and other organizations of the City had united their efforts and 133 pints of milk are being given daily to these children.

The colored nurse has organized health clubs in every colored school in the County. The object of these clubs is to teach the children the importance of personal hygiene and the observance of other laws of health.

HOOKWORM ERADICATION:

1,470 tests for hookworm were made and 894 treatments given. A complete hookworm survey of the negro children in all the rural schools was begun in December and will continue into the new year.

IMMUNIZATION AND TESTS:

Near the beginning of the school year 1,093 children were given the Schick test and the positive cases were given toxin-antitoxin or toxoid. During the year 384 children, mostly infants and pre-school were immunized against diphtheria, 2,407 complete typhoid inoculations were given and 1,508 persons vaccinated against smallpox.

PRENATAL:

A prenatal clinic was held at the A. & M. College Hospital at which 51 cases were examined. Each Wednesday at the colored Health Center pregnant women come for Kahn tests, urinalyses and consultation. During the year the nurses have contacted 123 cases, and made 485 home visits, held 16 group meetings, and had 298 office consultations with expectant mothers.

Classes for the midwives have been held each month during the year.

INFANT, PRESCHOOL AND SCHOOL WORK:

127 infants and pre-school children were examined; 780 home visits were made and 480 office consultations with parents of infants and pre-school children.

3,924 examinations of school children were made; 564 home visits and 760 office consultations with parents.

The colored nurse weighed, measured and tested vision and hearing of 1,977 children in the colored schools.

The Blue Ribbon contest is being put on by some of the schools. The High School will give a health letter (or emblem) to each student who has been successfully vaccinated against smallpox, immunized against typhoid and diphtheria and has all physical defects corrected that can be remedied. Much interest in health work has been aroused in this school and a very large percent of the students will receive the health letter.

Under auspices of the Kiwanis Club 38 indigent children had tonsils removed. The Lions Club sponsored the examination and fitting of glasses to indigent children. About 30 were examined and 12 were furnished with glasses. The Exchange Club furnished 1,000 five-grain capsules of quinine to needy children at one school. Most of this was administered at the school by the teacher to the ones with

clinical symptoms of malaria. This enabled several children to attend school regularly who previously were unable to do so on account of fever.

EXHIBIT:

Our booth at the County Fair emphasized nutrition, sanitation and screening.

DAIRIES:

All of the dairies in the county have made improvements and comply fairly well with the requirements of the Standard Milk Ordinance. All dairy cattle have been tested for tuberculosis and infectious abortion.

LABORATORY TESTS:

2,688 specimens of various kinds have been sent to the State Laboratory during the year.

SANITATION:

Due to the depression the sanitation work has fallen short of our expectations for the year. 561 sanitary pit toilets have been installed; 37 septic tanks and 136 new sewer connections made during the year.

WORK OF ORAL HYGIENIST:

2345 children were examined and the teeth of 745 were cleaned.

MALARIA CONTROL WORK:

One white and one colored man with truck have oiled and dusted all standing water within the City of Tallahassee; also a number of ponds adjacent to the City at regular intervals all year. The Florida Power Corporation dusted a series of ponds at weekly intervals all fall. The total acreage of these ponds was approximately 275.

Two marshy breeding places in and near the City have been cleared during the year. Through the R. F. C. considerable drainage work has been done and is still in progress.

A total of 19,195 cubic yards of dirt has been moved. The length of ditch work done totals approximately 2 3/4 miles. When the work is completed, it will be a great aid to us in our malaria control work.

About the first of December an engineer was added to the personnel of the Unit. His duty is to promote screening and minor drainage projects. (His salary and expenses are paid by the Rockefeller Foundation and State Board of Health). His work so far has been making a survey of the lakes and ponds of the county, supervising the ditching and looking over new drainage projects.

L. J. Graves, M. D., Director,
Leon County Health Unit.

U. S. PUBLIC HEALTH SERVICE
STATE BOARD OF HEALTH COOPERATING

1932 ANNUAL REPORT

ESCAMBIA COUNTY HEALTH UNIT

The first ten months that organized health work has been conducted throughout Pensacola and Escambia County brings the unit to the beginning of a new year with two major reasons, viewed with great pride by the Escambia County Medical Society, social and civic leaders, and others interested in public health work here.

First, public sentiment is overwhelmingly in favor of curbing the spread of disease by preventive measures. In other words, the majority of the people in the city and county fully realize the value of public health work.

Second, typhoid fever has been practically wiped out, though previously a year never passed without a large and unnecessary number of deaths resulting from this disease.

In fact the stamping out of typhoid has been so intertwined with the growth and development of the unit that more attention is given to this subject in that connection.

BRIEF HISTORY OF UNIT

With the City of Pensacola, the County of Escambia, the State Board of Health and the U. S. Public Health Service cooperating, the Escambia County Health Unit was organized during the month of March 1932. Offices were established in the State Board of Health laboratory building, 803 North Palafox Street.

The present director began the organization on March 1st, adding to the personnel during the month, completing the organization after April 1st. The personnel at that time consisted of director of unit, secretary, one public health nurse for city, one public health nurse for county, one sanitary inspector for county, three sanitary inspectors for city and one dairy supervisor who acted as food inspector.

During the month of March a survey of the city and county was made. There was an outbreak of typhoid fever which threatened to become epidemic, thirty-nine cases being reported during the month of March. The activities of the health department during March was directed towards finding out the source of the disease and preventing a further spread.

It was learned that untreated sewerage from the city emptied into Pensacola Bay and that oysters were being taken from these polluted waters and sold on the streets or from house to house by peddlers.

Also, it was learned, there were over 2,000 insanitary fly-breeding, open back surface toilets in the city.

An ordinance to prohibit the sale of oysters from the polluted areas was prepared and presented to city council which adopted it without delay.

A second ordinance, to make surface toilets illegal, was likewise prepared and adopted by council. This forced the owners of premises, on which such toilets were located, to either connect with sewer lines, install toilets with septic tanks or pit privies of an approved sanitary type.

EDUCATIONAL

Equally important with the cooperation of public officials has been the campaign of education carried out.

Public addresses have been made by the director or nurses to civic organizations, Parent-Teachers associations, hundreds of talks directly to children in their schoolrooms, reaching an estimated total of approximately 20,000. Public health bulletins were posted in conspicuous places. The newspapers of the city contributed liberally of their space to the cause of public health, both editorially and through their news columns.

SANITARY INSPECTIONS

Sanitary inspections during that ten-month period totalled 14,654. These inspections included private premises, public places such as schools, churches, tourist camps, hotels and other food handling and producing places. During that time 2,010 nuisances were found and corrected. The campaign of sanitary inspections was especially directed against fly-breeding places in the city, back lots were cleaned up, weeds were cut, oil was used on standing water, and surface toilets were destroyed.

SPECIAL INSPECTIONS

Special inspections were directed to all food handling places such as markets, restaurants, bakeries, cafes and dairies. Inspections of dairies alone totalled 1,611. Fifty-three dairies are now selling Grade-A milk in Pensacola as a result of these inspections and adoption by city council of the Standard Milk Ordinance.

Passage of this ordinance was especially gratifying to the dairymen because there has been a marked increase in the consumption of milk. In fact some of the largest producers are unable to satisfy fully the demand.

CHILD HYGIENE

There is a rigid law concerning the practice of midwifery in this state. It is compulsory for midwives to attend meetings to receive instructions before they are permitted to practice. The ignorant and those physically unfit are not permitted to practice. Home visits, pre-natal visits are made by the public health nurses and instructions given. During the past ten months 1,187 visits of this kind were made.

COMMUNICABLE DISEASE CONTROL

The director of the unit or one of the public health nurses visits every case of communicable disease when information is furnished of such diseases. The household is given both verbal and written instructions about preventing the spread of the disease. Quarantinable diseases are isolated and quarantined and the quarantine sign is not allowed to be removed except by the health officer or the public health nurse.

Hookworm disease is very prevalent in this county. Examinations are being constantly made and free treatment furnished. It is the purpose of this organization to carry on an intensive campaign throughout the county against this disease.

During the past ten months, sixty-four cases of typhoid fever were reported, five resulting in deaths. Thirty-nine of these were reported during March, eleven in April and fourteen the remainder of the year. ONLY ONE DEATH WAS REPORTED WHERE THE DISEASE WAS CONTRACTED AFTER THE HEALTH UNIT WAS ORGANIZED. People receiving complete antityphoid inoculations at the health unit totalled 5,623. It is safe to say that at least 3,000 received immunization from private physicians. This, with the elimination of the surface toilets, the prohibition of selling oysters from polluted waters, the rigid inspection of our milk supply, contributed to the great reduction of typhoid fever in this city.

This leads to our outstanding objective for 1933.

TUBERCULOSIS CONTROL

Tuberculosis is one of the greatest problems in this community, with the possible exception of venereal diseases. We are handicapped in the control of tuberculosis in this county as there is no institution to care for these cases in the county or state. Only educational work can be done but we are confident that EDUCATION AND THE COOPERATION OF THE PUBLIC CAN CURE THIS EVIL IN THE SAME WAY THAT TYPHOID WAS WIPED OUT HERE. Frequent visits are made to each tuberculosis case by the director and public health nurses and instructions given as to how to prevent the spread of the disease in that particular household. There were probably forty deaths from this disease in 1932.

VITAL STATISTICS

Weekly reports from the registrar of vital statistics are made to this office, as the registration of vital statistics is done elsewhere.

LABORATORY

All laboratory work of a public health nature is done at the local branch of the state laboratory. Examinations made during the past ten months totalled 1,405

OUTSTANDING POINTS OF INTEREST CONCERNING THE ESCAMBIA COUNTY HEALTH UNIT SINCE IT WAS ORGANIZED:

First: The education of the general public in this county as to the need of a health organization of this kind in their midst.

Second: The adoption by the city council of a sanitary ordinance outlawing the insanitary surface privy.

Third: The adoption by the city council of the Standard Milk Ordinance of the United States Public Health Service which insures a safe milk supply.

Fourth: The adoption by city council of an ordinance regulating the sale of oysters in the city of Pensacola.

Fifth: The practical elimination of typhoid, largely as a result of the first four points.

REPORT OF THE BUREAU OF CHILD WELFARE

1923

Personnel: Laurie Jean Reid, R. N., Director

Staff Nurses:

Harriet J. Sherman, R. N.	January 1 - December 31
Ruth Mettinger, R. N.	January 1 - December 31
Noreita Alvis, R. N.	January 1 - December 31
Estelle Bonner, R.N. (colored)	January 1 - December 31
Secretary: Margaret Loest	January 1 - December 31
Stenographer: Half-time, Maternity and Infancy, Willie Mae McCormick.	

The work of the Bureau of Child Welfare was limited practically to maternal and infant hygiene since no funds had been appropriated for other activities.

The program was a continuation of that introduced in the summer of 1922 when the Sheppard-Towner funds first became available, whereby each of the three white nurses was detailed to a district of approximately one-third the state, 22 counties and the colored nurse to the state at large. By February 1923, the state-wide survey begun in September 1922 had been practically completed, the white nurses having spent approximately one week in each county contacting as many midwives as could be reached in that time. (The nurses were on railroad transportation until early in 1923.) During this survey each midwife contacted had been given a manual and a small supply of silver nitrate with instructions to obtain further supplies from her local registrar.

During 1923 the state was again covered by the same staff chiefly in the interest of better midwifery although the program was broadened to include mothers' meetings, infants and preschool well-baby conferences (examinations made by local physicians), birth registration, and general educational work, including talks, conferences and newspaper publicity.

Midwives: 2800 were visited in their homes and in addition 649 reached through 118 meetings. 631 were given "Certificates of Fitness", an innovation introduced by a State Board of Health ruling in lieu of desired registration made impossible by the failure of the Legislature to enact a law legalizing midwifery.

Other Activities: 280 mothers' meetings were held attended by 5516 mothers; a total of 14,588 "instructive" home visits were made; 34 well-baby conferences were held with an attendance of 1720, 729 of which were "normal". A total of 993 defects were noted. Formulae were given to 220. A total of 223 talks and lectures were made by the Director. (Some difficulty was encountered in securing a continuation of the appropriation from the Legislature, the Senate finally being won over, the bill passing by a vote of 17 to 12.)

364 previously unreported births were found and reported. About 150 women found practicing midwifery the preceding year stopped voluntarily when advised by the nurse to do so. A manual for mothers -- How Shall We Feed Our Children -- was prepared by the Director.

REPORT OF THE BUREAU OF CHILD WELFARE

1924

Personnel: Laurie Jean Reid, R. N., Director

Staff Nurses 15

Secretary: Margaret Loest	January 1 - December 31
Stenographer, part-time: Willie Mae McCormick	January 1 - December 31
Movie Truck Operator: Tom Randle	October 1 - December 31

On May 1, five school and communicable disease nurses were employed by the State Board of Health and added to the staff of the Bureau of Child Welfare. In addition thereto, two maternity and infancy nurses were added, making a total of six employed in the latter activities.

Harriet Sherman, R. N.	January 1 - December 31
Ruth Mettinger, R. N.	January 1 - December 31
Noreita Alvis, R. N.	January 1 - December 31
Estelle Bonner, R. N. (col.)	January 1 - December 31
Maude Holman, R. N.	April 1 - October 1
Thelma Mosley, R. N.	September 1-December 31
Jean Campbell, R. N.	May 1 - October 1
Cora Baertsch, R. N.	May 1 - December 31
Inez M. Roche, R. N.	May 1 - December 31
Isabelle MacCann, R. N.	September 1- December 31
Estelle Sumner, R. N.	May 1 - December 31
Lula Davis, R. N.	March 1 - December 31
Byrtene Anderson, R. N.	May 1 - December 31
Mary Corrothers, R. N.	September 1-December 31
Martha Lansden, R. N.	December 1- December 31

The state was re-districted, the number of counties to each nurse being reduced from 22 to from 11 to 14.

The health movie truck was detailed to the Bureau the first of October for a period of two months. The following pictures were shown: "Our Children" and "Well Born", borrowed from the Federal Children's Bureau, a film on hookworm, one on birth registration, one on diphtheria, and one on mosquito control.

Other than school nursing, no new activities were introduced except the intensive investigation of stillbirths reported on the monthly forms sent in by midwives and a shift in the manner of reaching the mothers, public meetings being dropped and private groups -- "Neighborhood Institutes" -- being substituted therefor.

Midwives: A total of 1834 were investigated in their own homes besides reaching a similar number in classes. Improvement in the cleanliness and completeness of the bags was noticed. It was estimated that about 500 midwives had ceased this activity since a careful check-up of their methods had been introduced. 723 were examined during the year; 114 were licensed, certificates refused to 51, and the remainder were given renewals.

Birth Registration: Intensive birth registration was continued, a total of 999 unreported births being found and added to the list. Florida was admitted to the Federal Birth Registration Area October 10, 1924.

Other Activities: 370 Neighborhood Institutes were held; also a total of 108 infant and preschool well-baby conferences (with some school children included with an attendance of 3143.

Home Visits: A total of 5372 were made in the interest of maternal, infant and preschool child hygiene.

Little Mothers Leagues were introduced in two communities. A large number of persons were reached in numerous meetings, in routine talks, lectures, etc.

DIVISION OF COMMUNICABLE DISEASES AND SCHOOL HYGIENE

A total of 939 schools were visited, 10,564 children given class-room inspections, and 26,262 individual inspections. A total of 724 children were excluded because of pediculosis, skin diseases or symptoms of communicable disease. 2704 parent consultations were held at school, 780 class talks, and 211 tooth brush and handkerchief drills given.

Office work: Approximately 30,000 pieces of literature, besides 46,291 school health records, 8439 boxes of silver nitrate and 4564 midwives monthly reports were sent out. 2808 midwives monthly report blanks were received.

PUBLIC HEALTH NURSES

A considerable increase in the number of locally employed public health nurses occurred. 16 white and 2 colored were employed in the early part of the year and 5 county and 3 school nurses, the latter through the direct influence of the Bureau, were employed. One of the staff nurses was detailed as field supervisor to assist the Director in handling this increased work.

Personnel: Laurie Jean Reid, R.N., Director
Staff Nurses 19

Harriet J. Sherman, R.N.	January 1 - September 30
Ruth Mattinger, R. N.	January 1 - September 30
Estelle Bonner, R.N. (col.)	January 1 - December 31
Norvita Alvik, R.N.	January 1 - February 28
Cora Baertsen, R.N.	January 1 - July 31
Isabelle MacCann, R.N.	January 1 - December 31
Estelle Sumner, R.N.	January 1 - March 31
Lula Davis, R. N.	January 1 - December 31
Byrtene Anderson, R. N.	January 1 - December 31
Mary Corrothers, R. N.	January 1 - December 31
Martha Lonsden, R. N.	January 1 - August 31
Eva Borden, R. N.	February 1 - December 31
Fairy Settle, R. N.	April 1 - August 31
Elizabeth Woodson, R. N.	October 1 - December 31
Boulah Hieber, R. N.	September 1-December 31
Mary G. Dodd, R. N.	October 1 - December 31
Laura Niblock, R. N.	November 1 -December 31
Helen Davis, R. N.	October 1 - December 31
Mary L. Crosby, R. N.	November 1- December 31
Secretary: Margaret Loest	January 1 - December 31
Stenographer, part-time: Willie Mae McCormick	January 1 - December 31
Movie Truck Operator: Tom Randle	January 1 - December 31

The above 19 nurses were employed a total of 130 months.

The routine work with midwives, mothers, infants, preschool children, and school children was interfered with to a considerable degree by the influx of tourists brought in by the boom. Three nurses were detailed to do maternity and infancy work in the tourists camps alone. A general re-organization within the Bureau was initiated with the expectation of changing from a specialized to a generalized nursing program by September 1, 1925.

Two state-wide campaigns were conducted, one to interest the public for the first time in the celebration of May Day, the object being the preparation of the preschool child for school, and the other a hookworm survey. 16,000 specimens were collected. Attention was also given to National Negro Health Week wherever sufficient number of negroes was found to warrant this procedure.

Midwives: 2372 were investigated in their own homes; 1440 were examined; certificates were issued to 575; the equipment of 1721 was inspected; 461 classes were held.

Other Activities: The Neighborhood Institutes were dropped for lack of time. Talks, lectures, home visits, the usual office work, and infant and preschool well-baby conferences were carried on as well as could be under the unsettled conditions. Intensive birth registration continued. 581 hitherto unreported births were found and registered.

Division of Communicable Diseases and School Nursing.

45 school clinics were held with an attendance of 1842; also one tonsil clinic with 28 corrections, and ten tuberculosis clinics, nine white and one colored, with an attendance of 109, and one eye clinic with an attendance of 65, all defective. This was the first time attention had been given by the Bureau to strictly clinical work.

Arrangements were made for new nursing services in eight counties and one city; namely: Volusia County, Putnam County, Brevard County, Marion County, Alachua County, Escambia County, St. Lucie County, Palm Beach County, and in Key West.

REPORT OF THE BUREAU OF CHILD HYGIENE AND PUBLIC HEALTH NURSING

1926-1927-1928-1929

Summary for the first half of 1926

(Taken from the nurses' monthly reports to the Bureau of Child Hygiene and Public Health Nursing)

During these six months 452 midwife classes were held with a total attendance of 964.

Home Visits: A total of 7642 home visits were made. These were divided as follows: Prenatal and Lying-in, 682; infant, 2591; preschool, 4369. A total of 118 previously unrecorded births were found and registered.

Summary from July 1, 1926 to June 30, 1929

(Taken from Reports to Children's Bureau)

During this time a total of 3018 midwife classes were held with a total attendance of 9966. The number enrolled total 4695.

Home Visits: A total of 20,974 home visits were made. These were divided as follows: prenatal, 2063; postnatal, 552; infants, 8050; preschool, 10,309

Other Activities: A total of 773 talks were given of which 59 were before physicians, 30 before nurses, 673 before lay groups, and 11 by radio. A total of 77,356 pieces of literature was distributed.

47,205 infants and preschool children and 4445 expectant mothers were reached.

During this time the following counties have taken over maternity and infancy work: Escambia, Dade, Palm Beach, Orange, Pinellas, Volusia, Hillsboro, Sarasota, Manatee, Dade, Pinellas, Taylor, Duval, St. Johns, Marion.

Summary for the Last Half of 1929

(Taken from the nurses' monthly reports of the Bureau of Child Hygiene and Public Health Nursing.)

During this half-year 570 midwife classes were held with a total attendance of 2037.

Home Visits: A total of 4652 home visits were made. These were divided as follows: Prenatal and Lying-in, 420; infant, 1805; preschool, 2427. A total of 123 previously unrecorded births were found and registered.

Together these reports show a grand total of 4040 midwife classes with a total attendance of 12,967 during the four years.

Likewise a total of 33,268 home visits divided as follows: 3717 prenatal and lying-in visits; 12,446 infant; and 17,105 preschool.

REPORT OF THE BUREAU OF CHILD HYGIENE AND PUBLIC HEALTH NURSING

1930

Personnel:	Laurie Jean Reid, R.N., Director	January 1 - January 31
	Lucile Spire Blachly, M.D., Director	January 31- December 31
	Harriet Sherman, R. N.	January 1 - July 31
	Mary Dodd, R. N.	January 1 - December 31
	Clio McLaughlin, R. N.	January 1 - December 31
	Jule Graves, R. N.	January 1 - December 31
	Joyce Ely, R. N.	January 1 - December 31
	Sarah Richards, R. N.	January 1 - December 31
	Nanna Colby, R. N.	January 1 - December 31
	Frances Hall, R. N.	January 1 - December 31
	Thora Roberts, R. N.	January 1 - November 1
	Lella Mary Goggans, R. N.	September 1-December 31
	Annie Gabriel, R. N.	December 15-December 31
	Irene Odell MacGreen, R. N.	September 1-December 31
Office Staff:	Lillian S. Tarlyn	January 1 - March 31
	Helen Van Osdel	January 1 - December 31
	Blanche Mathis	May 15 - July 1
	Nora Huntly	July 1 - December 31

Midwives: Routine midwife work was carried on in 41 counties of the state. This consisted of arranging for and conducting four classes for each midwife group. At this time the midwife equipment was examined. On completion of the class work, which was based on the Midwife Manual, an examination oral and practical was given. The old licenses were collected and the new ones given out to those who had passed a satisfactory examination, whose bags were complete, or reasonably complete, and whose record as a midwife for the past year was good. A total of 804 midwives were contacted. 5% were found to be practicing without license. 757 midwives were examined for the purpose of obtaining license to practice with the following results:

Certificates were issued to	15%
Certificates refused to	5%
Certificates renewed	75%
Certificates revoked	5%

452 demonstrations and classes were held for midwives. The total attendance was 1697. 977 bag inspections were made, with the following results: 82% were complete; 15% were incomplete; 3% had no equipment.

Infant and Preschool Conferences: Under the auspices of the Woman's Clubs, Parent-Teacher Associations, Home Demonstration Clubs and other groups, 171 Infant and Preschool conferences were held in approximately 41 counties. 115 of these were for white children and 56 for colored. The total attendance was 1642, white 964 and colored 678.

Health Circus: The health demonstrations were held in connection with the screening and pit toilet demonstrations in 20 counties for both white and colored. The exhibit consisted of the following:

- | | |
|---------------------------|------------------------------------|
| 1. Infant Layette | 7. The Baby's Bed |
| 2. Preschool Clothing | 8. The Baby's Bath |
| 3. Maternity Clothing | 9. Food for the Baby |
| 4. Obstetrical Package | 10. Food for the Preschool Child |
| 5. Model Confinement Room | 11. Food for the Nursing Mother |
| 6. Mother's Tray | 12. Food for the Expectant Mother. |

Literature was given on each subject demonstrated and pre- and post-natal names obtained for the Maternity Letter mailing list. Demonstrations were given from time to time as the crowds gathered and were interested.

Birth Registration: 383 visits were made to local registrars. 89 birth certificates were secured from doctors and 81 unreported births reported.

School Work: Routine school work was carried on in 24 counties. 321 schools were visited -- 253 for white children and 68 for colored children. 4201 children were inspected, 2901 white, and 1300 colored.

Where possible local doctors made the inspections. If this could not be arranged the nurse made the inspections. 20% of the inspections were made by doctors, 80% by nurses. The nurse notified the parents of the findings in each instance by a special slip when a child was found to have physical defects. 2339 children were found to have 6153 physical defects.

Parents meetings were held to discuss the need of corrective measures, immunization and the value of keeping fit. 50 parents meetings were held in schools, with a total attendance of 369. 49 meetings were with white parents, with an attendance of 329. 1 meeting was held for colored parents with an attendance of 40. Home calls were made on the parents of children with physical defects when the parent did not attend the parents meeting. A total of 2002 home calls were made in behalf of school children, 1638 white and 364 colored.

Community Health Meetings: Community health meetings were held in Bay, Leon, Liberty, Suwannee and Walton Counties. These county-wide Community Health Meetings were a means of promoting closer cooperation of the school authorities, local doctors and dentists, farm agents, club leaders, parents and the State Board of Health. A program was arranged which included several talks on health. Malaria and hookworm were always discussed. Other topics usually discussed were tonsils, adenoids, care of the teeth, nutrition, conserving vision, etc. These rather scientific talks were alternated by presentations of the various county schools, such as, selections by the high school orchestra, a one act health play, drills by the primary grades, special vocal numbers, etc. Attendance was usually good, from 200 to 400.

Hookworm: Distribution of hookworm bottles and collection of specimens to send to the laboratory was a major part of the school work. A talk on the life cycle of the hookworm together with explicit directions for obtaining specimen were given each group. After the laboratory reports were obtained slips were made out with the name of the child and the result of the laboratory analysis. These were given to the teacher for distribution to the children or their parents and her cooperation asked in urging parents to have positive cases treated. 1907 hookworm specimen bottles were collected.

CHILD HYGIENE WEEKS

Child Hygiene Weeks were conducted in Duval, Calhoun, Okaloosa and Volusia Counties. The chief features of Child Hygiene Week are:

1. A social assets survey of the county made by the state nurse previous to the Child Hygiene Week.
2. An all-day health institute for community leaders attended by one delegate from each of the organizations, clubs, associations, etc., in the county, including among others, representatives of schools and churches and the local official health authorities.
3. A one or two days' demonstration child health conference to introduce the periodic physical examinations, especially of infants and preschool children, the examinations to be made by the family physician in his own office.
4. Exhibits: Exhibits of those supplies and materials essential to the rounding out of the child's whole health are assembled by local groups and featured as a part of the Week; namely, toys, books, tools, music, art, play-ground supplies, etc., in addition to the specific exhibits of special value in introducing maternal and infant hygiene.
5. Follow-up: Each child examined during Child Hygiene Week was followed up by the state nurse for the purpose of determining how well the instructions given by the doctor were carried out.

Social Assets Surveys were made in the following counties: Alachua, Baker, Broward, Calhoun, Columbia, Dade, DeSoto, Duval, Franklin, Gilchrist, Hamilton, Lee, Leon, Levy, Okaloosa, Palm Beach, Putnam, Suwannee, Santa Rosa, Wakulla.

MATERNITY LETTER SERVICE

Prenatal letters were prepared by the Director, one set for mothers expecting to use physician in their confinements and another set for mothers expecting to use midwives. These sets consisted of nine letters with enclosures. A set of postnatal letters consisting of five letters with enclosures was also prepared by the Director. 741 mothers were enrolled for the maternity letters during 1930.

LAST REPORT OF BUREAU
of
CHILD HYGIENE AND PUBLIC HEALTH NURSING
1931

Personnel: Lucile Spire Blechly, M.D., Director, January 1 - December 31
 Clio McLaughlin, R.N., Chief, Nursing Division, January 1 - December 31
 Mary Dodd, R. N. January 1 - December 31
 Annie Gabriel, R. N. January 1 - December 31
 Julia Graves, R. N. January 1 - December 31
 Joyce Ely, R. N. January 1 - December 31
 Frances Hall, R. N. January 1 - December 31
 Sarah Richards, R.N. January 1 - December 31
 Lella Mary Goggans, R. N. January 1 - December 31
 Nanna Colby, R. N. January 1 - December 31
 Helen Van Osdel January 1 - December 31
 Nora Huntly January 1 - June 1
 Dorothy Huntly June 1 - December 31

At the beginning of the year it was hoped the program worked out and tentatively introduced in 1930, to replace that which had maintained from about September 1, 1922 to 1931, could be carried on intensely in its entirety but one phase of it, namely, the "Child Hygiene Weeks" had to be postponed to some degree in the interest of work with the midwives. With this exception the other three phases, namely, the maternity letter service, classes and instruction in parent and pre-parental education and work with the county units went on as planned.

The physical inspections of children, infants, preschool and school, by the nursing staff were discontinued September 1, 1930. In lieu thereof it was planned to have the field nurses concentrate on follow up, including assistance in a larger measure in the program of the Bureau of Communicable Diseases. This was accomplished to some extent even though the demands made by the state-wide midwife survey were enormous. One nurse was detailed to the Bureau of Communicable Diseases to assist with chest clinics from July to October. Further assistance in one way or another was rendered the District Health Officers from time to time throughout the year.

The attempt to obtain improvement in the current reports and records started in 1930 continued throughout the first half of the year with a creditable measure of success following the attendance of the Chief of the Nursing Division at the Conference of Supervisors of Nursing Staffs in Chicago May 21, 1931.

An effort early in the year to comply with a request from the State Health Officer for a resume of work of the Bureau from the time of the last published report (1921-22) until the present re-emphasized this lack and likewise disclosed room for improvement in the methods of filing.

Assistance was given in three national campaigns devoted to the improvement of child health, namely, May Day, sponsored by the American Child Health Association, the White House Conference on Child Health and Protection, called by President Hoover, and Mothers' Day, sponsored by the Maternity Center Association of New York.

The State Midwife Survey

The compilation of the Laws, Rules and Regulations Pertaining to the Practice of Midwifery, the working out of plans for putting the midwife law, passed early in the year, into effect, together with the assembling of data, writing of articles and frequent conferences made necessary by the above, took heavy toll of the time of the nursing staff and the Director.

Activities

The activities carried on during the year included:

- A. The maternity letter service.
- B. Parent Education
 - a. Parent education per se
 - b. University classes
 - c. Demonstrations in the Hygiene of Maternity, Infancy and the Preschool Child.
 - d. Exhibits.
- C. Work with midwives.

A. Maternity Letter Service

During the year 2224 mothers registered for prenatal letters, including postnatal, and 241 for postnatal alone. The prenatal names came from 61 counties ranging from one from Monroe County to 181 from Palm Beach.

B. Parent Education

a. Parent Teacher and Other Groups.

In an effort to supply the demand of local public health nurses for assistance with mothers' study groups, a nurse especially trained in parent education, Miss Annie Gabriel, was added to the staff. On January 6, 1931, work started with a group of mothers of the Mainland High School in Daytona Beach. A total of 43 study courses were conducted during the year in ten counties.

b. University classes.

One class in Child Care and Training and one in Maternal and Infant Care were introduced for the first time at the State University during the summer. The newness of the courses together with their classification and length discouraged large enrollments, the former being but 12 and the latter 9. However the interest shown was remarkable, so much so that Miss Gabriel has been asked to repeat the courses during the summer of 1932 with assurance that certain changes as to hours and placement will be made so as to permit larger attendance.

c. Demonstrations in the Hygiene of Maternity, Infancy and the Preschool Child.

These demonstrations were carried on at intervals by various members of the nursing staff during the year. The demonstrations most popular were: Additional Foods for the Infant under One Year, The Baby's Bed, the Baby's Bath, the Model Confinement Room, the Baby's Tray and the Mother's Tray.

d. Exhibits

The equipment used in the above demonstrations, totaling 300 or more items, was used as exhibits throughout the year principally in connection with annual state-wide meetings, such as Federation of Woman's Club, State Parent Teacher Association, State Medical Association, the State Nurses Association, etc.

C. Work with Midwives.

The practice of certifying midwives measuring up to certain standards set by the State Board of Health in 1924 was continued through 1930. During that year it became increasingly evident to the Director that unless more stringent regulations were introduced and enforced little further reduction could be expected in the still shamefully high maternal mortality rate.

Following a series of conferences with the State Health Officer, with Dr. McCord and with various members of the nursing staff, a decision was reached to institute a state-wide midwife survey to obtain data on which to base, (a) the initiating of joint supervision with local boards of health and public health nursing services, (b) a renewed and insistent demand for a law legalizing midwifery, and (c) scope of such law.

Early in January the plans for such a survey were evolved and the forms necessary for its promotion worked out. Briefly this meant a personal contact by some member of the nursing staff with each midwife, licensed and unlicensed, either alone or in groups, who was known to have delivered a patient in 1930. All local registrars were visited and data obtained as to number of babies registered. The information obtained through the personal data card included the name, address, sex, color, marital state, age, academic education, professional education, experience, other occupation, disease history, date of last license, date of last instruction and names and addresses of local doctors relied on when needed. The work was put in charge of Miss Joyce Ely, who together with Miss Mary Dodd, worked up the first survey in Duval County. Following this test, minor revisions were made and the work carried to all parts of the state.

ACTIVITIES OF THE DIRECTOR

The activities of the Director during the year included the working out of plans for the state-wide midwife survey, together with plans for putting the new law into effect; the fashioning of forms for routine and special reports; assistance to county units; talks, special lectures and demonstrations to organized classes; examination of infants and preschool children; attendance at committee meetings; instruction of the nursing staff; attendance at annual state meetings and service on special committees.

The Director served as State May Day Chairman and as Secretary of the Florida Council on Health, Welfare and Education.

In carrying out the above 35 talks, made mostly at state and county wide meetings, were given to audiences totaling 2989 persons. 22 talks on the Hygiene of Maternity, Infancy and the Preschool Child were given at Demonstration Child

Health Conferences with an attendance of 603; 9 lectures were given at the summer session of the State University, attendance 282; 14 lectures to the 4-H Club Girls, attendance 490.

Examination of 463 infants and preschool children were made at Demonstration Child Health Conferences in four counties.

Six committee meetings of special importance were attended in the interest of the State Council on Health, Welfare and Education, State Conference on Child Health and Protection, May Day, Social Hygiene, the Marriage Bill and the registration of midwives.

Numerous conferences were had with the Chief of the Nursing Division and with the field nurses, singly and in groups, with reference to tabulating data obtained at Demonstration Child Health Conferences, the daily-monthly reports, statistical and narrative, the midwife survey and the registration of midwives.

Both full-time county health units, Leon and Taylor Counties, were visited several times in the interest of initiating Child Hygiene programs. A total of 343 children was examined in the former and 40 in the latter. In both instances the initial conferences were a part of the Child Hygiene Weeks.

The plan for making the state-wide midwife survey was drawn up, forms for its conduct made, the findings from 57 counties as tabulated by Miss Ely, worked up in narrative and chart form for the State Health Officer, the Laws, Rules and Regulations Pertaining to the Practice of Midwifery compiled and included with the revised Midwife Manual under one cover, and plans for putting the law into effect evolved and added to the nurses manual.

Seven annual state meetings and one national, the meeting of the American Public Health Association at Montreal, were attended.

Considerable time was spent in assembling the published and unpublished reports of the Bureau and such other data as could be had, since its beginning in 1918. Reports from 1922 to 1929 inclusive, were summarized for the State Health Officer.

Report of the
DIVISION OF PUBLIC HEALTH NURSING

1932

Personnel

Joyce Ely, R.N., State Supervisor of Midwives, January 1 - September 15
Lalla Mary Goggans, R.N., Assistant Supervisor of Midwives, Aug. 18- December 31
Jule O. Graves, R. N., Field Contact Nurse, September 15 - December 31
Mary G. Dodd, R. N., January 1 - December 31
Annie Gabriel, R. N., January 1 - December 31.

Miss Ely, State Supervisor of Midwives, was awarded the Rockefeller Fellowship in midwifery and left September 15th for a ten months study leave in New York.

Miss Dodd was assigned to the tuberculosis clinics assisting Dr. Claxton with the tuberculin tests. She has assisted in arranging the clinics and in as much follow up as was possible considering the time consumed in the clinics themselves. Up to the end of the year Miss Dodd was assigned to the Bureau of Communicable Diseases.

Office Staff

Helen Van Osdell, January 1 - December 31
(Miss Van Osdell has been temporarily loaned to this division from the Executive Office.)
Anne King, March 17 - December 31.

Activities

- A. Work with midwives
 - 1. Midwife Registration (a) 1932
(b) 1933
 - 2. Field Work
 - 3. Midwife Exhibit
- B. Other than midwife work
 - 1. Work with county units
 - 2. Public Health Nurses
 - 3. Child Hygiene Exhibits
 - 4. Parent Education.
- C. Maternity Letter Service
 - 1. Letters distributed in quantity lots
 - 2. Individual.
- D. Literature and Supplies
- E. Miscellaneous: Meetings attended.

1932

A. Work with Midwives.

1. (a) Midwife Registration 1932.

The midwife work for the year 1932 was chiefly assisting midwives to comply with the 1931 midwife registration law. Applications for license to practice midwifery were sent out to all midwives who were listed in the 1931 midwife survey. On December 31, when the midwife registration was closed for the year 1932, there were 947, 107 white and 840 colored, who had made application for license to practice midwifery according to the law. 816 applications for license, 714 colored and 102 white were approved by the State Health Officer and license granted. Of these licenses, 8 were Class A, 23 Class B, and 785 Class C. All licenses were marked "temporary" because no examination was held during the year for midwives. There were 650 midwives, 75 white and 575 colored, who made application for certificate of registration and paid the registration fee of one dollar. 166 midwives, 21 white and 145 colored, failed to have their licenses recorded in the Court House and make application for certificate of registration in accordance with the law. Most if not all of these midwives wrote into the office, begging for mercy and telling of the "hard times" in the district where they lived. The people they had "waited on" were not able to pay them anything for their services and in some instances the three cents were borrowed in order to get a stamp to write "in".

During the year there were 143 midwives, 9 white and 134 colored, who were refused license to practice midwifery by the State Health Officer, the reason for refusal being old age, small amount of practice, syphilis, and inability to secure recommendations of two licensed practicing physicians. 328 midwives, 83 white and 245 colored, were notified not to practice midwifery because they had not made application for license according to the midwife registration law. Two midwives had their license to practice midwifery revoked by the State Health Officer and one case was filed with the county prosecuting attorney for practicing midwifery without license and registration.

(b) Midwife Registration 1933.

770 applications for license to practice midwifery for the year 1933 were sent out in November and early in December as the temporary licenses to practice midwifery issued in 1932 expired on December 31. 334 midwives, 25 white and 309 colored, made application for license and 264 licenses to practice midwifery, 25 white and 239 colored, were issued for January 1, 1933. Of these licenses 6 were Class B and 258 Class C.

2. Field Work

42 counties were visited one or more times in the interest of midwife registration, i.e., Alachua, Bradford, Broward, Calhoun, Charlotte, Columbia, Dade, DeSoto, Duval, Escambia, Flagler, Gadsden, Gilchrist, Gulf, Hardee, Hernando, Hillsboro, Holmes, Indian River, Jackson, Jefferson, Lake, Lee, Levy, Leon, Marion, Okaloosa, Osceola, Orange, Palm Beach, Pinellas, Polk, Putnam, St. Johns, St. Lucie, Santa Rosa, Seminole, Suwannee, Taylor, Volusia, Walton, Washington.

The supervision and instruction of midwives was delegated wherever possible to local health authorities. During the year 22 city and county health departments accepted all or part of the responsibility of supervising and instructing the midwives.

Midwife Meetings
(In counties with local supervision)

At the request of the local supervisors of midwives, visits were made to the following counties to assist with the midwife registration work and midwife classes: Dade, Duval, Hillsboro, Lee, Lake, Marion, Osceola, Orange, Polk, Putnam, Seminole, St. Johns.

In 3 counties the following exhibits were set up and demonstrated:

1. The Model Confinement Room
2. The Mother's Tray
3. The Obstetrical Package.

Number of midwives attending classes: Total 417; white 16; colored 401

Bag Inspections:

Total	100	white 9	colored 91
Complete equipment	43	4	39
Reasonably complete	41	3	38
Incomplete equipment	10	0	10
No equipment	6	2	4

Midwife Meetings
(In counties without local supervision)

County-wide all day midwife classes were held in the following 17 counties: Bradford, Charlotte, Columbia, DeSoto, Flagler, Gadsden, Gilchrist, Gulf Hardee, Holmes, Jackson, Jefferson, Okaloosa, Santa Rosa, Suwannee, Washington, Walton.

Program for Classes

1. 1931 Florida Midwife Law
 - (a) Explained in detail
 - (b) Sections 1, 2 and 7 from Chapter 12005 read from "Laws, Rules and Regulations Pertaining to the Practice of Midwifery."
2. Birth Certificates
 - (a) The importance stressed of reporting all births to the Local Registrar, in the community where the baby is born, within ten days of the date of birth.
 - (b) Sections 13 and 22 from Chapter 6392 read from "Laws, Rules and Regulations."
3. Midwives not having 1932 License and Certificate of Registration
 - (a) A check up on the number of midwives present not having 1932 license and registration.
 - (b) Names obtained of midwives in county that are practicing without license and registration.
4. Midwife Manual
 - (a) The new Midwife Manual explained and discussed.
 - (b) Demonstration of midwife bag given.
 - (c) Use of new articles in bag explained - safety razor, mask, new cord dressing.
 - (d) Questions.
5. Bag Inspection
 - (a) All equipment used by midwives on a case inspected.
 - (b) Bags marked with tag according to completeness of equipment.
 - (c) Equipment assembled.

Number of midwives attending classes: Total 229; white 30; colored 199.

Bag Inspections: Total	181	white 38	colored 143
Complete equipment	103	16	87
Reasonably complete	42	7	35
Incomplete equipment	28	5	23
No equipment	17	10	7

An effort was made while in the field to enlist the support of the local doctors, public health nurses, nurses, registrars and interested individuals in bettering the work of the midwives.

Personal Interviews

Health Officers	33	Nurses-not public health . .	15
Doctors-not public health .	59	Interested Individuals . .	281
Public Health Nurses	130	Registrars	23

Whenever time allowed, home visits were made to midwives who had not attended the midwife meetings, investigations of midwives who were practicing without license and registration and discovering unreported births.

Home Visits to Midwives: total 62; white 8; colored 54

Number of midwives practicing without license and registration investigated: total 60; white 18; colored 42.

A colored man living in a poverty stricken rural community in the Western part of the state had apparently never heard of the law requiring midwives to register, or that births and deaths should be recorded with the local registrar of that voting precinct. He had delivered his "last wife of most" of their 14 children and had also "attended" two of his daughters when they "went in". On October 6, 1932, his wife died, one month after her baby was born and the baby only lived about six weeks. Recently he had been called in to deliver a white woman of 24 whose husband was 82. Two internal examinations were made and the baby died on the 8th day. This feeble old man of 72 seemingly attached little importance to the midwife law as he did not care to become a "regular midwife". The duty was always forced on him.

Unreported births discovered: total 29; white 14; colored 15.

All of the unreported births discovered were obtained from midwives who were practicing without license and registration.

3. Midwife Exhibit

An exhibit was prepared for the fourth annual meeting of the Florida Public Health Association which was held in Ocala December 5th to 7th. Two maps 29 x 29 inches showing the number of colored and white midwives at the present time in Florida by counties, that were licensed and registered, licensed only and unlicensed. The model midwife bag, midwife manual, pictures of Florida midwives, prenatal and postnatal literature were also displayed.

B. Other than Midwife Work

1. Visits to County Health Units

Visits to observe the work in the county health units in Escambia, Taylor and Leon Counties were made: Taylor County, 5 days; Leon County, 8 days; Escambia County, 1 day.

2. Public Health Nurses

The newly appointed public health nurses were visited and the outline of their programs discussed. Invitations to visit the State Board of Health in Jacksonville for observation was extended to all public health nurses.

3. Child Hygiene Exhibits.

The Child Hygiene exhibits were listed and made available as loans to public health nurses to be used in connection with their maternal and infant programs. The following exhibits were loaned to Leon County Health Unit, Marion County Public Health Nurse, Jacksonville Health Department, Escambia County Health Unit:

Layette, Preschool Clothing; The Baby's Bath, The Baby's Bed, Preparing Additional Foods for the First Year, Preparing the Baby's Tray, The Mother's Tray, The Obstetrical Package, The Model Confinement Room.

4. Parent Education

As is indicated in the statistical report, the work for the year just closed has extended from Jacksonville to Key West and St. Petersburg. The greater interest has been in the more thickly populated counties. The classes in the city P.T.A.'s are larger and better attended. The uneducated are less interested in self-improvement than those who have had some training. Some of the most eager learners are college graduates in Home Economics.

The two largest classes were the mothers of high school students in St. Petersburg and the Gorrie Elementary school mothers in Tampa. Each class had an enrollment of seventy-five.

The complete totals are as follows:

Enrollment in parent groups	2565
High School Classes	478
Attendance at individual talks	1132
Total	4175

Some of those who attended individual talks were enrolled in classes, but I feel confident that around thirty-five hundred persons have been reached in audiences.

While the work was in progress in Pinellas County, the St. Petersburg newspapers put out a May Day special supplement devoted entirely to Child Health.

A new service was inaugurated in the fall -- that of giving individual interviews in homes. This gives the mother time to talk over in detail her child training problems. This work is time consuming as each interview requires two or more hours, so the number that can be given per week is small. These interviews seem to be filling a real need as I have had more calls than I could meet.

When parents are asked about subjects for their discussion groups, they usually wish something about behavior, obedience, discipline, temper or stubbornness. But physical health is one of the principal interests. A record has been kept of all questions brought up for discussion and the topic having the largest number of questions is that of sex education, the next largest number is in regard to physical health.

Much of the bad behavior in children starts over food and mealtimes, or is due to malnutrition or other physical defects. Health and acceptable behavior or the lack of either cannot be separated in the child. The child is an individual, a unit, and must be so dealt with. So, I find it easy to show the mother the need for medical attention when the child has poor appetite and stubborn spells, or frequent colds and is unruly.

Eventually, when we get parents sufficiently educated to demand and provide for pre-parental education for our boys and girls, most of the work now being done in our parent education classes will be taken care of by the family physician, or the pediatrician. In the meantime there is need for some one to help parents see the relationship between health, health habits, development and behavior.

Statistical Report

Parent Groups

Date	County or Town	No. Groups	No. Lessons	No. Enrolled	Total Attendance	No. Certificates
1/3-1/22	Monroe	2	11	174	377	18
1/24-2/26	Dade	14	68	430	892	125
3/1-4/4	Volusia	8	39	219	630	85
4/11-5/20	Pinellas	14	72	411	1319	203
5/23-6/2	Cocoa	3	16	80	204	29
9/19-10/20	Duval	18	91	464	1089	199
10/24-11/23	Hillsboro	15	71	670	1812	337
11/28-12/2	Pasco	2	10	70	210	24
12/3-12/16	Marion	2	7	47	92	2
Totals	9	78	397	2565	6625	1022

C. Maternity Letter Service

Since the suspension of the Bureau of Child Hygiene and Public Health Nursing made it impossible to continue the maternity letter service on the same scale, public health nurses through the state were notified that the State Board of Health would be glad to supply these letters to them in quantity lots, the nurse assuming the responsibility of distributing them each month in her district.

(1) Letters distributed in quantity lots: Complete sets of maternity letters were sent to 20 public health nurses in 14 counties, i.e., Baker, Dade, Duval, Escambia, Hernando, Hillsboro, Leon, Orange, Osceola, Palm Beach, Polk, St. Johns, Taylor.

Number Prenatal Letters	23,523
Number Postnatal Letters	12,233
Total	35,756

(2) Letters to Individuals: The individual maternity letter service reached 439 mothers, 154 white and 305 colored, in 62 counties. All counties but Citrus, Dixie, Martin, Oksechobee and St. Lucie. 349 of these requests were referred to the State Board of Health by midwives, 54 by physicians and 35 by interested individuals. 9 sets of the maternity letters were sent to the following states: Oklahoma, Illinois, Georgia, Massachusetts, New York.

Number Prenatal Letters	7,673
Number Postnatal Letters	<u>6,683</u>
Total	14,356

D. Literature and Supplies Distributed:

<u>Federal Children's Bureau Booklets</u>	
Infant Care	895
Prenatal Care	451
The Child from 1 to 6	405
Are You Training Your Child to be Happy?	184

<u>Federal Children's Bureau Folders</u>	
What Builds Babies?	25
Breast Feeding	62
Keeping the Well Baby Well	108
Out of Babyhood into Childhood	178
Why Drink Milk?	182
Why Sleep?	136
Sunlight for Babies	109
Minimum Standards of Prenatal Care	36

<u>Midwife Supplies</u>	
Silver Nitrate boxes	3462
Midwife Monthly Reports	5482
Midwife Manuals	937
Joint Pledge Cards	2034
Midwife Bag Inspection Tags	585
Mask Patterns	241
Cord Dressing Patterns	526

<u>Miscellaneous</u>	
Abdominal Binder Patterns	10
Prenatal Report Blanks for Maternity Letters	2574
Teachers Physical Examination Blanks	2550
Hookworm Specimen Report Blanks - Negative	2200
Positive	1480

E. Miscellaneous - Meetings Attended

Antituberculosis Institute, Jacksonville, February 9-10.
Conducted by Miss Violet H. Hodgson, R.N., Assistant Director of the National Organization for Public Health Nursing.

American Legion Area C Child Welfare Committee, Jacksonville, February 12-13.

Florida State Nurses Association, St. Augustine, Nov. 2nd, 3rd, 4th.

Fourth Annual Meeting of the Florida Public Health Association, Ocala, December 5th, 6th and 7th.

Tallahassee, Florida
February 23, 1932

Dr. Henry Hanson, State Health Officer
Florida State Board of Health
Jacksonville, Florida

Dear Dr. Hanson:

In response to the verbal request given during your recent visit to the station, I enclose herewith an adaptation of certain parts of the annual report which I trust may serve your purpose.

Sincerely yours,
(Signed) Mark F. Boyd.

Division of Malaria Research, Florida State Board of Health,
Tallahassee.

The field studies prosecuted by the station during 1931 may be summarized as follows:

Malaria Reconnaissance in Northern Florida.

It was considered desirable that before the contemplated station was established in Florida, more detailed information than that available from mortality statistics be gathered for the Orientation of the station. Accordingly, Dr. W. K. Stratman-Thomas was, on the invitation of the State Health Officer, detailed to that state to make a reconnaissance, largely in the counties of west central Florida lying between the Suwannee and Apalachicola rivers. The investigation was to be based on the results of spleen examinations of school children, both white and colored. Accordingly, Dr. Thomas took the field in January and continued this investigation to the end of March, visiting all schools in session at the time. It is a pleasure to acknowledge the hearty co-operation he received from the county superintendents of schools, and from the teachers. It is impracticable, in the limited space available, to give an account of the results secured at each school. Suffice it to say that these have been plotted on a large scale map of the region. The results, summarized by counties, incorporating also data gathered by myself during the previous December, are given in the following table. These data indicate the existence of a severe malaria problem in several of these counties, and an appreciable problem in all. The lightest incidence is found in the red hill section, in which are found the larger towns, as well as the major portion of the negro population. The heaviest incidence is observed in the piney flat woods section, which is sparsely inhabited by a rural white population. The incidence is higher in the western than in the eastern part of this territory.

Malaria Field Studies.

Systematic field studies of malaria were planned as one of the projects of the station. It was desired to organize intensive studies, where the flowing incidence of malaria can be followed for a considerable period in a highly endemic circumscribed area served by a single physician. After examining the possibilities, the territory in and adjacent to Sneads in Jackson County was selected. Since mid-summer, routine observations on Anopheline incidence in this area have been made, and a survey of school children was made in November.

A considerable incidence of malaria occurred in this area despite the dry season, as is shown by the results of the school survey.

School	Race	Exam.	Number with splenomegaly		Number with positive Blood	
			ind. P.D.I.	Percent	Blood	Percent
Sneads	White	335	90	26.8	8	2.4
Sneads	Colored	38	11	28.9	4	10.5
Sinai	Colored	42	23	54.7	14	33.3
Little Zion	Colored	77	21	27.2	4	5.2

The three common Anophelines of the southeastern United States were found in this area. Their relative monthly incidence has been as follows:

Per cent of specimens identified						
Species	July	August	September	October	November	December
Larvae						
A. quad.	22.8	30.	40.6	34.7	11.	4.3
A. punct.	16.6	33.2	21.7	48.1	81.	83.2
A. Crus.	60.5	36.5	38.	17.1	7.9	12.2
Adults						
A. quad.	--	62.5	79.4	67.9	66.	16.4
A. punct.	--	5.	3.5	8.6	12.4	77.
A. crucs.	--	32.1	16.9	23.3	21.4	6.5

These data suggest that in this latitude, each species has different periods of maximum abundance. It appears that crucians is a summer species, quadrimaculatus being most abundant in spring and fall, while punctipennis is a winter species. The idea of a spring and fall peak of quadrimaculatus is confirmed by the catches at the station on the Wacissa river.

TABLE 1

County	Schools visited		Sex	Examined		Schools Neg.	P.D.I.	Results				Total All palp.	Palp. excl. P.D.I.	Index	
	White	Colored		White	Col.			#1	#2	#3	#4			All	Excl P.D.I.
				203		0	27	16	9	0	0	52	25		12.3
Jefferson	7	33	both	587		9	41	12	11	3	0	67	26	11.4	
				219		0	37	12	7	0	0	56	17		7.7
Madison	7	12	both	215		6	25	9	1	0	0	35	10	16.3	
				120		0	27	15	5	2	0	49	22		18.3
Franklin	3	3	Male	88		1	13	8	4	0	0	25	12	28.4	
				241		0	45	36	18	5	1	105	60		24.8
Wakulla	13	0	both	-		-	-	-	-	-	-	-	-		-
				100		0	19	9	5	0	0	35	14		14.
Lafayette	1	0	both	-		-	-	-	-	-	-	-	-		-
				110		0	21	19	2	2	0	44	23		20.8
Liberty	5	3	both	41		2	7	1	0	0	0	8	1	19.5	
				131		2	24	7	10	4	0	45	21		16.1
Dixie	7	2	Male	34		1	1	0	0	0	0	1	0	2.9	
				245		2	29	28	10	5	0	72	43		17.5
Leon	8	26	both	596		5	37	10	0	0	0	47	10	8.1	
				512		1	74	32	14	2	0	122	48		9.3
Gadsden	13	14	both	362		2	33	12	3	0	0	48	15	13.7	
				649		0	109	54	23	6	0	192	84		13.6
Jackson	19	29	both	501		1	76	38	15	10	2	141	65	28.2	
				479		1	183	41	25	9	0	258	75		15.6
Taylor	12	3	both	78		0	6	3	0	0	0	9	3	11.5	

These observations suggest that crucians may be an important factor in malaria propagation in this state.

The different species have had the following types of production areas in the 3 periods characterized by the dominance of each species in succession.

	Type of water	No. observations	No. positive	No. larvae identified		
				A. quad.	A. punct	A. crucians
July-Aug. (crucians)	Permanent stream	2	2		19	
	Int.str.floving	8	1		1	
	Int.str.pooled	4	3		45	2
	Excavations	4	3	6	-	1
	Wells, springs	11	6	1	7	37
	Lime sinks	-	-	-	-	-
	Lakes & ponds	140	37	75	19	83
	Temp. water	16	5	10	1	11
Sept.-Oct. (quadrinaculatus)	Permanent stream	9	7		40	5
	Int.str.floving	8	3		17	2
	Int.str.pooled	15	14	9	201	38
	Excavation	6	2	9	18	
	Wells, springs	13	8		103	4
	Lime sinks	11	0			
	Lakes & ponds	170	92	409	107	237
	Temp. water	23	12	42	9	22
Nov. Dec. (punctipennis)	Permanent stream	21	19	8	299	3
	Int.str.floving	-	-	-	-	-
	Int.str.pooled	7	4	3	71	1
	Excavations	8	0	-	-	-
	Wells, springs	4	4	1	18	-
	Lime sinks	11	0	-	-	-
	Lakes & ponds	94	26	35	80	47
	Temp. water	9	1	9	17	1

It may be noted that in the vicinity of Tallahassee, we have encountered the tree-hole breeding Anopheline, A. barbori, in the climax type of beech-magnolia forest.

Division of Malaria Research, Florida State Board of Health,
Tallahassee. - 1932

MALARIA Induced Malaria

Since its establishment in Tallahassee, Florida a little more than eighteen months ago, the Station for Malaria Research, acting in co-operation with the Florida State Board of Health and the Florida State Hospital has been largely occupied in the study of naturally induced malaria as employed in the therapy of paresis and neurosyphilis.

Although the work was initiated by utilizing wild Anopheline imagines, it was placed upon a much securer technical plane by the perfection of an insectary which permits the rearing of an abundance of Anopheles quadrimaculatus in captivity. In fact, in the insectary there have been reared in captivity in the space of a year eleven consecutive lineal generations of this Anopheline. These have the further advantage of being as large, vigorous and blood thirsty as the best wild specimens, as well as being free from any possibility of malaria infection. One of the factors in this success has been the discovery that properly ripened pans of hay infusion constitute the best pabulum yet encountered for the nourishment of the larvae.

Several improvements in laboratory procedure have resulted in a perfection of the technique of propagating the malaria parasites through their sporogonous or mosquito cycle. A high proportion of the mosquitoes are successfully infected, effective methods of manipulation and conservation during incubation and storage have been developed, so that mosquito mortality is low, and large numbers of the infectious insects are available. The controlled application of these mosquitoes to patients for whom malaria therapy has been prescribed produces very dependable results.

Most of the patients have been inoculated with Plasmodium vivax. Of this species of malaria parasite, five strains have been employed. During this period one of these has been propagated through ten consecutive and lineal Anopheline-human transfers. Most of these inoculations have been effected with Anopheles quadrimaculatus, although propagation of this parasite by A. punctipennis, A. crucians (inland), A. atropis and A. walkeri has been successful. The conservative employment of this species of malaria parasite demonstrates that it can be successfully used in malaria therapy with very little risk to the patient.

A few negro patients have been successfully inoculated with Plasmodium falciparum, by the employment of Anopheles quadrimaculatus. A limited experience with this species of parasites suggests that milder strains may be effectively employed in therapy, providing the medical attendants are watchful to interrupt the clinical evolution of the infection, if necessary to the welfare of the patient.

An accomplishment of especial interest has been the successful propagation of the parasite of quartan malaria, Plasmodium malarine, by means of experimentally infected Anopheles quadrimaculatus. The station has had available three strains of this parasite, the first of which was received from the United States Public Health Service. Most of the quartan inoculations have been made by the transfer of blood. However, mosquitoes have been successfully infected with two of these strains, including that received from the Public Health Service. The successful human inoculation with mosquitoes noted above was affected with the latter strain, while the results of mosquito inoculations with another strain are pending.

The experience already gained with Plasmodium vivax throws some interesting light on benign tertian malaria. The infectiousness of a patient harboring this parasite, considered from the standpoint of the number of cysts which develop on the stomach of an Anopheline, is proportional to the number of mature microgametocytes in the patient's blood. A patient experiencing an attack of benign tertian malaria due to any of the strains of the parasite investigated, acquires a tolerance to the presence of the parasites of this strain which makes reinfection or superinfection impossible. They still remain susceptible to other strains of the parasite. While the primary inoculation of some white patients has

been successful, there has not as yet been encountered a white patient who was refractory to inoculation when a sufficient number of mosquitoes was employed. Primary inoculations performed by lightly infected single mosquitoes fail in about one-third of the cases, although all white patients on whom four infected mosquitoes were applied, including those resistant to the light doses, have become infected. Considering the probable "dose" of sporozoites a patient has received, particularly from the standpoint of the intensity of the stomach infection which characterizes a given lot of mosquitoes, indicates that the length of the incubation period, and the character and severity of the clinical manifestations are directly proportional to the probable dosage of sporozoites. No incubation period has been less than 10 days in duration, while very few exceed 20 days, and, in white patients have not been observed to exceed 35 days. Negroes are strikingly refractory to inoculations with *P. vivax*. Only three inoculations of this race have been successful, though producing only light and transitory infections of no therapeutic value. Adult negro males have been found with a tolerance that successfully resists the application of 16 Anophelines of proven infectivity. Some evidence has been secured that indicates the refractoriness of negroes is a racial rather than an acquired characteristic.

To the end of the year, results of malaria therapy can only be fully considered in the 56 cases inoculated in the first six series. Of those 8, or 14.2 per cent have improved sufficiently to warrant their parole from the institution. All in all, 41.1 per cent show varying degrees of mental improvement, although it is interesting to note that even where no mental improvement is observable, a very evident improvement in their general physical condition nearly always follows. Of these 56 patients, only three have died, in none of which instances could the mortality be attributed to the malaria infection. The experience indicates that where care is employed in selecting patients for this mode of therapy, and that where the cases are conservatively managed, there is little risk to the patient. Attention must be directed to the discovery of a species or strain of the malaria parasites suitable for the inoculation of negro paralytics.

Boyd, Mark F. "A note on the preparation of Anopheline dissections for examination" American Journal of Hygiene, XVI (1932)

Boyd, Mark F. "On methods for the manipulation and conservation of Anopheline imagines" American Journal of Hygiene, XVI (1932)

Boyd, Mark F. and Cain, T.L.Jr., "On large scale rearing of *Anopheles quadrimaculatus* in captivity", American Journal of Hygiene, XVI (1932)

Boyd, Mark F. and Stratman-Thomas, Warren K., "Studies on *Plasmodium vivax*: 1. The microgametocytes as a factor in the infectiousness of the infected human". American Journal of Hygiene, XVI (1932)

Boyd, Mark F. "Studies on *Plasmodium vivax*; 2. The influence of temperature on the duration of the extrinsic incubation period". American Journal of Hygiene, XVI (1932)

Boyd, Mark F. "Successful cage rearing of *Anopheles quadrimaculatus*". Science 76, 370, October 21, 1932.

The following papers have been submitted for publication:

Boyd, Mark F. and Stratman-Thomas, Warren K., "Studies on benign tertian malaria: 1. On the occurrence of acquired tolerance to *Plasmodium vivax*"

Boyd, Mark F. and Stratman-Thomas, Warren K., "A controlled technique for the employment of naturally induced malaria in the therapy of paresis".

Matheson, Robert; Boyd, Mark F., and Stratman-Thomas, Warren K., "Anophelos *walkeri*, Theobald, as a vector of *Plasmodium vivax*, Grassi and Felotti".

Boyd, Mark F., and Stratman-Thomas, Warren K., "Studies on benign tertian malaria: 2. The clinical characteristics of the disease in relation to the dosage of sporozoites".

Boyd, Mark F., and Stratman-Thomas, Warren K., "Studies on benign tertian malaria: 3. On the absence of a heterologous tolerance to *Plasmodium vivax*".

Boyd, Mark F., and Stratman-Thomas, Warren K., "A note on the transmission of quartan malaria by *Anopheles quadrimaculatus*".

Boyd, Mark F., and Stratman-Thomas, Warren K., "Studies on benign tertian malaria: 4. On the refractoriness of negroes".

MALARIA

Malaria and Physiography

The geographical distribution of malaria mortality in the southeastern United States presents several peculiar features. It had already been noted that it is largely confined to the coastal plain, quite closely delimited by the lower margin of the Piedmont plateau. More recent studies have elucidated further characteristics. Thus in Georgia it largely occupies a wedge shaped zone extending transversely across the state, with its broadest section lying in the southwest. At either end there is an extension into adjoining states. It extends into South Carolina on the northeast, and on the southwest it projects into the extreme southeastern portion of Alabama, and boldly extends into the coastal counties of central Florida which border the Gulf. The peculiarities of this position cannot be attributed either to elevation or to the fluvial hydrography, as excepting the Florida section the area is not coastal, while in Georgia the malaria belt bisects all of the river basins of the state considerably above their points of discharge.

A study carried out at the Station for Malaria Research in collaboration with the Florida State Geological Survey, indicates that this region has a peculiar physiography, attributable to the character of the underlying geological formations, which make it peculiarly susceptible to the annual fluctuations in precipitation.

It is found that this area of intense malaria lying in these four states very closely co-incides with the area of outcropping of certain limestones of the tertiary period, particularly those known as the Tampa, Vicksburg and Ocala formations. In the areas where these limestones closely underlie the surface, the usual horizontal type of stream erosion leading to the development of an abundance of surface water courses is but slightly developed. In its stead there exists what physiographers designate as "solution topography". This develops since the highly soluble limestones are gradually dissolved by the downward percolation of water, leading to the formation of cavernous passages occupied by underground streams. As a result of this diversion of water, the effect of the erosional processes which mold the topography of other regions is minimized, and consequently such a region is not an area of high relief. In time, many places in the roof of these passages become weakened and give way, forming steep walled funnel shaped

depressions of relatively small diameter, known as "sink holes". Further erosion, either subterranean or surface, may either enlarge such depressions, or effect a partial filling. Consequently in such solution areas, the topography is characterized by the presence of basin shaped depressions, varying in dimensions from a few hundred feet to miles in diameter. Some are permanently filled with water, forming lakes or ponds, others remain dry except during periods of heavy rainfall, when they hold temporary ponds. Usually in the last instance the water is derived directly from precipitation, though most of the former are fed by springs which represent the outlets of solution passages.

It was further ascertained that the annual fluctuations of malaria incidence in the areas of solution topography closely co-incide with the fluctuations in the summer precipitation, particularly in the six months from May to October inclusive. The entire area of solution topography lies in a zone which normally receives the major part of its precipitation during the summer months.

Thus the solution topography produces many shallow basin shaped depressions devoid of an outlet, in which surface water is retained in wet summers. It thus appears to promote the opportunities for the breeding of Anopheles quadrimaculatus in temporary water.

The following paper is in press:

Boyd, Mark F., and Ponton, Gerald, "The recent distribution of malaria in the southeastern United States".

DIVISION OF MALARIA CONTROL STUDIES

The Division of Malaria Control Studies, under the direction of Surgeon T. H. D. Griffiths, U. S. Public Health Service, began in September, 1932, a country-wide malaria parasite index. It is planned to extend this survey to include all counties in Florida where malaria is considered of major importance. Aside from obtaining the most nearly exact and reliable index rate of malaria among school children, it is hoped that through this thick smear blood index to establish a direct relationship of evaluation between the parasite rates and the reported death rates by counties. To begin with, a group of counties showing a mortality rate of 100 or more per 100,000 population has been selected in which all of the school children have been or will be, examined for malaria parasites. As was expected, the high mortality rates correspond to the Counties with a relatively high P. falciparum rate in the counties thus far surveyed.

The results of blood examinations in seven counties are given in the following tables:

MALARIA BLOOD INDEX

1932 - 1933

(Thick Films)

		Pos.		Malaria		E.A.*	B.T.	Mixed	Sp.?
		No.	%	No.	%	%	%	%	%
BRADFORD COUNTY - No.Exam. No.									
(SCHOOLS)									
White									
New River	45	3	6.6	100.0	0.0	0.0	0.0	0.0	0.0
Theressa	20	1	5.0	100.0	0.0	0.0	0.0	0.0	0.0
Rising	64	2	3.3	0.0	50.0	0.0	0.0	50.0	0.0
Brooker	159	5	3.1	80.0	0.0	0.0	0.0	20.0	0.0
Lawtey	233	6	2.6	0.0	0.0	0.0	0.0	100.0	0.0
Hampton	107	2	1.7	100.0	0.0	0.0	0.0	0.0	0.0
Heilbron	66	1	1.5	0.0	0.0	0.0	0.0	100.0	0.0
Starke	388	3	0.8	0.0	33.3	0.0	0.0	66.7	0.0
Vanderbilt	49	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Graham	29	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Woodlawn	32	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Boatdrain	15	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Colored									
Hampton	54	4	7.4	50.0	0.0	25.0	25.0	0.0	0.0
Clayno	37	4	10.8	50.0	50.0	0.0	0.0	100.0	0.0
Lawtey	111	1	0.9	0.0	0.0	0.0	0.0	0.0	0.0
Starke	113	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New River	43	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Pleasant Grove	30	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Brooklyn	20	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Sampson City	32	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Thurston	36	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Schools - 21	1643	32	1.9	37.5	18.8	3.1	40.6	0.0	0.0

CITRUS COUNTY - (SCHOOLS)

White									
Chassahowitzka	15	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Hernandon	46	1	2.2	100.0	0.0	0.0	0.0	0.0	0.0
Cak Grove	25	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Ozello	12	1	8.3	0.0	100.0	0.0	0.0	0.0	0.0
Homosassa Springs	9	2	22.2	0.0	100.0	0.0	0.0	0.0	0.0
Homosassa	65	10	15.4	10.0	50.0	0.0	40.0	0.0	0.0
Holder	22	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
New Hope	21	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Red Level	16	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Inverness	196	6	3.1	33.6	66.4	0.0	0.0	0.0	0.0
Crystal River	112	10	8.9	20.0	80.0	0.0	0.0	0.0	0.0
Citronelle	15	1	6.7	0.0	100.0	0.0	0.0	0.0	0.0
Floral City	61	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Pleasant Green	30	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Citrus	19	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Lecanto	62	2	3.2	100.0	0.0	0.0	0.0	0.0	0.0

CITRUS COUNTY Con't.-

	No. Exam	Pos. Malaria No.	%	E.A.* %	B.T. %	Mixed %	Sp.? %
Colored							
Red Level	8	3	37.5	0.0	100.0	0.0	0.0
Crystal River	74	12	16.2	41.7	58.3	0.0	0.0
Inverness	63	2	3.2	50.0	50.0	0.0	0.0
Leesmount	14	3	21.4	0.0	66.7	0.0	33.3
Russell Hill	18	1	5.6	0.0	0.0	0.0	100.0
Holder	18	0	0.0	0.0	0.0	0.0	0.0
Floral City	42	1	2.4	100.0	0.0	0.0	0.0
Hernando	52	4	7.7	75.0	25.0	0.0	0.0
Schools - 24	1015	59	5.8	30.5	59.3	0.0	10.2

DIXIE COUNTY-

(SCHOOLS)

White

Cross City	406	5	1.2	40.0	20.0	20.0	20.0
Futch	20	1	5.0	0.0	0.0	0.0	100.0
Horse Shoe	21	0	0.0	0.0	0.0	0.0	0.0
Rock Sink	2	0	0.0	0.0	0.0	0.0	0.0
Butler	16	0	0.0	0.0	0.0	0.0	0.0
Jena	34	2	5.9	50.0	50.0	0.0	0.0
Hill	11	0	0.0	0.0	0.0	0.0	0.0
Oldtown	84	8	9.5	62.5	37.5	0.0	0.0
Hines	27	0	0.0	0.0	0.0	0.0	0.0
Pine Hill	17	2	11.8	0.0	100.0	0.0	0.0

Colored

Summerville	30	2	6.7	100.0	0.0	0.0	0.0
Hines	17	3	17.6	33.3	0.0	0.0	0.0
Bow Legs	19	9	47.4	100.0	0.0	0.0	0.0
Eugene	13	2	15.4	100.0	0.0	0.0	0.0
Oldtown	23	1	4.3	100.0	0.0	0.0	0.0
Shamrock	152	6	3.9	100.0	0.0	0.0	0.0
Schools - 16	899	41	4.5	70.6	17.1	2.5	4.9

FLAGLER COUNTY -

(SCHOOLS)

White

Gilbert	29	0	0.0	0.0	0.0	0.0	0.0
Flagler Beach	41	2	4.9	50.0	50.0	0.0	0.0
Bunnell	272	6	2.2	100.0	0.0	0.0	0.0

Colored

Espanola	27	0	0.0	0.0	0.0	0.0	0.0
St. Joseph	18	0	0.0	0.0	0.0	0.0	0.0
St. Johns Park	4	0	0.0	0.0	0.0	0.0	0.0
Welden Johnson	53	2	3.8	100.0	0.0	0.0	0.0
Favorita	13	0	0.0	0.0	0.0	0.0	0.0
Orange Hammock	16	1	6.2	0.0	0.0	0.0	100.0
Schools - 9	473	11	2.3	81.8	9.1	0.0	9.1

Gilchrist County -

(SCHOOLS)

White

Bratram	23	0	0.0	0.0	0.0	0.0	0.0
Cleveland	15	0	0.0	0.0	0.0	0.0	0.0
Frankland	38	2	5.3	0.0	0.0	0.0	100.0
Bell	267	7	2.6	57.1	28.6	0.0	14.3
Trenton	348	6	1.7	10.0	90.0	0.0	0.0
Hickory Hill	27	1	3.7	3.0	0.0	0.0	100.0

Colored

Trenton	60	3	5.0	0.0	100.0	0.0	0.0
Schools - 7	781	19	2.4	26.4	52.6	0.0	21.0

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LEON COUNTY -

	No. Exam.	Pos. Malaria No.	%	E.A.* %	B.T. %	Mixed %	Sp.? %
(SCHOOLS)							
White							
Woodville	135	9	6.7	55.6	22.2	0.0	22.2
Strickland	12	5	41.7	100.0	0.0	0.0	0.0
Miccosukee	71	5	7.0	60.0	0.0	0.0	20.0
Caroline Brevard	92	9	9.8	100.0	0.0	0.0	0.0
Chaires	61	4	6.6	100.0	0.0	0.0	0.0
Fort Braden	67	6	8.9	66.6	16.7	16.7	0.0
Sealey	80	7	8.8	85.7	0.0	0.0	14.3
Colored							
Dawkins Pond	47	6	12.8	100.0	0.0	0.0	0.0
Chaires	90	11	12.2	100.0	0.0	0.0	0.0
Schools - 9	655	62	9.5	87.3	4.9	1.6	6.4

LEVY COUNTY -

(SCHOOLS)

White

Summer	19	5	26.3	80.0	20.0	0.0	0.0
Cason	29	1	3.4	0.0	100.0	0.0	0.0
Otter Creek	55	16	29.0	56.3	25.0	0.0	18.7
Ellzey	16	5	31.2	60.0	20.0	0.0	20.0
Gulf Hammock	85	7	8.2	42.8	28.6	14.3	14.3
Union	21	0	0.0	0.0	0.0	0.0	0.0
Cedar Keys	205	2	0.9	0.0	0.0	50.0	50.0
Ebenezer	17	0	0.0	0.0	0.0	0.0	0.0
Chiefland	413	6	1.4	0.0	66.7	0.0	33.3
Ynkeetown	36	5	13.8	0.0	100.0	0.0	0.0
Inglis	58	5	8.6	20.0	80.0	0.0	0.0
Tide Water	12	2	16.6	50.0	0.0	50.0	0.0
Rocky Hammock	16	0	0.0	0.0	0.0	0.0	0.0
Port Inglis	20	2	10.0	0.0	100.0	0.0	0.0
Bronson	97	4	4.1	50.0	25.0	25.0	0.0
Morrison	147	3	2.7	66.7	33.3	0.0	0.0
Copper Sink	33	0	0.0	0.0	0.0	0.0	0.0
Double Sink	34	1	2.9	100.0	0.0	0.0	0.0
Creech	14	0	0.0	0.0	0.0	0.0	0.0
Williston	273	12	4.3	81.8	9.1	0.0	0.0

Colored

Otter Creek	33	26	78.7	65.3	3.9	11.6	19.2
Montbrook	50	3	6.0	33.3	33.3	0.0	33.3
Summer	14	5	35.7	80.0	0.0	20.0	0.0
Barnes Hammock	29	9	31.0	44.5	33.3	11.1	11.1
Cedar Keys	29	0	0.0	0.0	0.0	0.0	0.0
Sims	10	0	0.0	0.0	0.0	0.0	0.0
Ellzey	19	16	84.2	81.2	12.5	0.0	6.3
Oven Prairie	14	3	21.4	33.3	33.3	33.3	33.3
Gulf Hammock	35	7	20.0	71.4	14.3	14.3	0.0
Bronson	49	9	18.3	88.8	11.2	0.0	0.0
Williston	93	4	4.3	50.0	25.0	0.0	25.0
Union	28	3	10.7	50.0	0.0	0.0	50.0
Chiefland	39	3	7.6	0.0	33.3	0.0	66.7
Morrison	29	0	0.0	0.0	0.0	0.0	0.0
Lebanon	18	8	44.4	50.0	12.5	37.5	0.0
Gulf Hammock	34	13	38.2	84.6	15.4	0.0	0.0
Bullard Still	37	19	51.3	89.4	5.3	0.0	5.3
Raleigh	50	8	16.0	37.5	62.5	0.0	0.0
Adamsville	39	1	2.8	0.0	100.0	0.0	0.0
Schools - 39	2249	213	9.4	60.0	23.9	6.6	9.5
Grand Total - 185	7715	437	5.7	58.1	25.2	4.1	11.5

*"EA" - Estivoautumnal; "B" - benign tertian; "Fixed" - tertian & estivoautumnal; "Sp?" - rare parasites wherein definite species determination was not feasible.

January 1st, 1933.

Dr. Henry Hanson,
State Health Officer,
Jacksonville, Florida.

Sir:-

I have the honor to submit herewith a condensed report of the work of the Bureau of Laboratories for the period which has elapsed since the publication of a formal report by the State Board of Health (1932).

For a long time Florida has experienced an annual influx of tourists during the winter season. This phenomenon in itself has added to the health problems of the State by the annual re-introduction of new strains of disease organisms with their attendant problems. But it fades into insignificance beside that greater phenomenon known as the 'boom'.

In 1925 and 1926 there were in Florida according to the estimates of competent authorities upwards of two millions of people as against one million in 1922. And this swelling of population was not for the tourist season alone, nor made up of the ordinary tourist class. It could not fail to influence every human relation, particularly those considered under the general heading of Public Health.

HOOKWORM DISEASE AND MALARIA

Hookworm disease and Malaria, two scourges of the South, seem to have been very little influenced by the population changes referred to. In the case of Hookworm the number of specimens submitted was more than doubled from 1923 to 1926. Thereafter the rate of increase was much less, the total increase from 1926 to 1932 amounting to not more than 50%. The percentage of positive findings remains fairly constant. In view of the contention that Hookworm has been conquered in the South, our findings are difficult to interpret.

Malaria is believed to have a cycle of about ten years. Whether this be true or not, the disease reached a high point in incidence and virulence in 1929, a phenomenon which cast its shadow a full year ahead. The actual number of specimens subsequently grows with the population but the percentage of positive findings fluctuates in a very interesting way.

DIPHTHERIA AND TYPHOID FEVER

These diseases resemble each other in the fact that adequate immunologic defenses have been devised. Their conquest has however, been more dramatic than complete. In palliation of public apathy may be urged the fact that the present generation has never seen these diseases at their worst.

VENEREAL DISEASES

The Venereal Diseases are still of great importance as causes of disability and death. The number of specimens submitted for the detection of the Gonococcus increases slowly, while the percentage of positive findings falls as slowly.

In the case of Syphilis, we are reasonably sure that the increase in the number of specimens submitted does not point to an increased prevalence of the disease but rather to a more frequent resort to the Laboratory for a routine 'blood test'. Some six or seven thousand of the tests for Syphilis credited to the Laboratory represent duplicate tests performed for the double purpose of familiarizing the Staff with new methods and testing the new methods against our old ones. The mere fact that a method is new is not sufficient warrant for adopting it, but on the other hand a one-cylinder automobile in perfect running condition would be of more interest as an antique than as a means of transportation.

RABIES

Rabies reached its highest percentage of positives in 1926, its largest number of positive animals in 1929 and its largest toll of human life in 1931 and 1932. The reluctance of the public to take measures against this disease, is very hard to understand.

PERSOINNEL

In spite of the increase in work the technical staff remains the same, numerically, as it was at the beginning of the period covered by this report.

Respectfully,
(Signed) Paul Eaton,
Director of Laboratories.

LOUVA G. LENERT, CHIEF ENGINEER
BUREAU OF ENGINEERING
STATE BOARD OF HEALTH
- INTRODUCTION -

The Bureau of Engineering of the State Board of Health was created in 1916 for the purpose of rendering helpful assistance to cities and towns in solving the Sanitary Engineering problems confronting them. To this end its efforts have been directed entirely with slight deviation necessitated by modern practice. Thus, the Bureau has a four-fold division of work, namely;

- I - Field Surveys, Studies and Investigations;
- II - Bacteriological Water Examinations and Special Studies;
- III - Office management and consultation;
- IV - Educational Activities.

An outline of the work undertaken is listed under the following:

1. Water Supplies.
2. Sewerage and Sewage Disposal.
3. Mosquitoes and Malaria Control.
4. Waste - other than Sewage - Disposal.
5. Sanitation of;
 - a. Schools
 - b. Swimming Pools
 - c. Canneries
 - d. Oyster Packing Establishments
 - e. Fairs
 - f. Tourist Camps
 - g. Institutions, Orphanages, etc.
6. Milk.
7. Rabies Control.
8. Special Reports, Investigations, etc.

This report of Bureau of Engineering activities and accomplishments covers the period from January first, 1923, through December 1932, and comprises only a generalized report of that period.

- PERSONNEL -

The Bureau organization during this decennial period is shown on the accompanying personnel chart.

NUMBERS OF SPECIMENS EXAMINED IN GENERAL AND BRANCH LABORATORIES
BY YEARS WITH PERCENTAGES OF POSITIVE FINDINGS

	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	TOTAL
HOCKNEY Positive % Pos.	11967 3146 26.4	19359 5794 30.0	27110 8013 29.4	31584 9842 31.2	29374 7085 24.1	30007 8557 28.5	30067 9456 31.4	36342 10702 29.0	40040 10177 25.2	43293 11984 27.6	300943
DIPHTHERIA Positive % Pos.	9448 1014 10.7	9743 832 8.5	11830 859 7.2	15567 1387 8.9	21583 1910 8.9	12939 1025 7.9	15557 1073 6.9	14916 724 4.9	26200 1306 4.6	39305 1372 5.0	177088
MALARIA Positive % Pos.	7518 556 7.4	7476 491 6.5	6714 299 4.5	5908 193 3.2	7233 141 2.0	6875 401 5.8	9852 1067 10.7	11614 739 6.3	9859 490 5.0	9864 409 4.1	82915
TYPHOID FEVER Positive % Pos.	5462 404 7.3	5454 385 7.1	5488 311 5.7	5203 257 4.9	6941 353 5.1	6876 245 3.6	9274 203 2.2	7226 159 2.1	10926 268 2.5	11637 257 2.2	74486
TUBERCULOSIS Positive % Pos.	4024 693 17.2	4036 643 16.0	3745 633 16.8	3874 625 16.1	3629 577 15.9	3943 619 15.7	4501 595 13.8	4239 632 14.9	4175 594 14.4	4371 651 14.9	40337
GONORRHOEA Positive % Pos.	4610 1379 29.8	5536 1613 29.2	5419 1911 35.1	7089 1690 26.6	7913 1779 22.6	7765 1694 21.8	9139 1998 21.8	9361 2001 21.4	11071 2285 20.7	12771 2662 20.0	80674
SYPHILIS Positive % Pos.	20010 2711 13.5	23655 3711 15.9	29994 4807 16.1	37130 7748 20.8	42643 9786 22.4	47141 9483 20.0	56173 11560 20.5	64377 10735 16.8	68740 9369 13.7	81658 10782 13.2	472521
PARATYPHOID Positive % Pos.	271 122 45.0	311 172 55.0	344 163 27.0	221 153 60.0	576 146 38.8	577 153 40.7	428 183 42.5	255 69 29.6	281 103 26.2	298 75 25.1	3140
TOTAL	72341	84711	101884	12610	15861	156664	156419	176579	206535	234618	1422255

YEAR	1923	24	25	26	27	28	29	30	31	32	Present Total
Chief Engineer	1	1	1x	1	1	1	1	1	1x	1	1
Assistant Engineers	1	1	1	2	2	1	1	1	0	0	0
Analyst - Asst. Director	1	1	1	1	1	1	1	1	1	1	1
CLERKS	1	1	1	1	1	1	1	1	1	1	1
District Sanitary Officers	4	6	7	12	7	7	7	7	6	6	6
Milk Specialist									1	1	1
TOTAL	8	10	11	17	12	11	11	11	10	10	10

x Indicates Changes of Chief Engineer.

District Sanitary Officers have been located at strategic centers and each is assigned definite areas for routine work, but temporary transfers are often necessary to meet emergency conditions.

At the Jacksonville headquarters are kept all records of the Bureau and permits are issued for tourist camps, bottled water plants, canneries, drainage wells, impounded water projects and swimming pools, and certificates are granted for interstate shipment of oysters and for drinking water used in interstate commerce by railroads, airplanes and steamship companies. Water and oyster samples are analyzed and reported, educational matter is prepared and meetings of the Florida Section, American Water Works Association and Florida Anti-Mosquito Association are organized.

Laboratory equipment is fairly modern and satisfactory for routine bacteriological water, sewerage and oyster work, and sufficient for routine chemical work which is handled here.

- ACTIVITIES -

Since the Bureau was created for the purpose of rendering helpful assistance to cities and towns in regard to sanitary engineering problems, the activities have also been necessarily carried on in urban areas, unincorporated mill villages, and outlying areas of the state. The efforts of the Bureau are primarily to prevent the spread of enteric diseases such as typhoid fever and dysentery, to check the spread of malaria, to eliminate hookworm, by preventing soil pollution, and to improve the general community health by improving of water supplies, sewerage and municipal health service. Some of the activities of the Bureau are investigations and studies of new water supplies, purification and treatment plants of old water supplies, sewerage and sewage disposal, both old and new installations, dairy sanitation, school sanitation, investigation and abatement of alleged nuisances, shellfish sanitation, swimming pool sanitation with a review of new plans and specifications, examination and approval

of all railway drinking water supplies, examination bacterially of all public water supplies in the state, tourist camp sanitation, septic tank regulations, studies of impounded water problems along malaria control lines, drainage well problems, control of the sale and handling of bottled waters, elimination of insanitary privies, rabies control, fair sanitation, salt marsh mosquito investigations, sanitary inspections of institutions, etc.

To simplify this report, make it more intelligible, and to facilitate an understanding of the Bureau's work, it has been divided into several sections, each treating with some specific branch of the work.

- WATER SUPPLY -

A majority of the public water supplies of Florida are derived from deep seated, underground sources, initially pure. It is possible however, for these supplies to become contaminated by improper handling from well to consumer, and thereby made unsafe. Uncovered and leaky reservoirs, uncovered standpipes, leaky mains, bypasses, dual or cross connections, and other appurtenances, oftentimes lead to contamination. Therefore one of the principal works of the Bureau has been to (1) maintain the hygienic purity of public and private water supplies, (2) point out the defective water supplies and appurtenances and encourage or order their discontinuance or treatment, (3) encourage sterilization and treatment of potentially dangerous water supplies, (4) cooperate with municipalities in investigation and studies pertaining to local problems, (5) make special studies or surveys of reported water troubles, (6) examine and certify all public and private water supplies used on common carriers for drinking and culinary purposes, and (7) examine water samples each month from public supplies, and from such other sources as may be permitted.

The work of the bacteriological laboratory in connection with water supply studies has increased materially over the past several years and is due mainly to the continued effort to have samples from all public supplies in the state, submitted each month. However, because of financial conditions and need for reduction during 1932, those public supplies which during the previous two years had given constant, satisfactory results were only required to submit samples at quarterly intervals and to the end of the year this procedure was working out satisfactorily. This action accounts for fewer examinations during 1932 than during the previous two years.

Complete chemical analyses are not made in the Bureau Laboratory for a full-time Chemist is not employed by the Board; however, partial chemical analysis which furnish an index of a new or contemplated supply are made upon request for municipalities or during special investigation for chemical content of waters such as Chlorides, Alkalinity, Sulphates, Hardness, Color, Iron and Total Solids.

The following list shows number of samples examined annually since 1923:

YEAR	NO. SAMPLES	YEAR	NO. SAMPLES
1923	901	1928	4820
1924	931	1929	5600
1925	1173	1930	6200
1926	1770	1931	6715
1927	5300	1932	4673

Standard methods of water analysis of the American Public Health Association are used in all Laboratory work. (Attached table shows 1932 examinations).

Space does not permit going into detail concerning the various supplies in the state, giving source of supply, treatment given, method of operations, etc., however, as stated previously the supervision of the public and private water supplies of the state is one of the principal duties of the Bureau and constant attention is given thereto.

- Certification to the Treasury Department -

Cooperating with the U. S. Public Health Service, Domestic Quarantine Division, inspection and certification of water supplies used on Common Carriers engaged in interstate traffic for drinking and culinary supplies is carried on by the Bureau. Field investigations of the supplies and the necessary bacteriological and chemical tests of the waters are made to see that they comply with the standard which has been adopted by the Treasury Department. This covers supplies used by Railroads, Steamship lines and Airplane service. It is gratifying to note that for the past five years Florida has received 100% for Certification from the Federal Government on this matter.

This service is furnished to thirteen railroads in the State, 24 steamship lines operating in the state and to six Air Ports, located in the principal cities of the State.

- Bottled Water -

Because of the fact that many Florida municipal water supplies are hard and in some instances contain iron or hydrogen sulphide, which renders them unpalatable to some people, also because of the fact that some people place great faith in the medicinal value of certain waters, and others have been placed on a special water diet by Physicians, and strangers - Tourists - in the State are prone to treat unknown waters with suspicion - the bottled water trade in Florida is quite extensive. To be certain that the handling of the water by the bottled water companies is done in a sanitary manner and proper methods used, the Board adopted Rule No. 26 which provides for the supervision of all bottled water plants by the Bureau and requires the operators to secure a permit before the water can be placed on the market. In accord with this rule, distilled waters, spring waters, mineral waters, brackish waters, iron waters, so-called "Radio Active" waters, electrified waters, medicinal waters, come under the State Board of Health Regulation if they are sold to the consumer in the bottled form. The plants are subjected to regular inspections by the District Sanitary Officers of the Bureau and examinations made regularly upon samples of the bottled product.

Rule 26 also covers the sale of bottled waters which are shipped in from other states. By cooperation with other state health departments, inspections of bottled waters produced in their respective states and sold in Florida are made.

GOOD - Indicates low bacterial Count, no presumptive evidence of contamination 48 hours incubation.
DOUBTFUL - Indicates presumptive evidence of contamination, (exceeding 5% gas fermentation in 48 hours in three or less 10 cubic centimeter portions or in the one and one-tenth cubic centimeter portions, but no confirmation on Eosin Methylene Blue Agar).
BAD - Indicates high count and presumptive evidence in four or more 10 cubic centimeter portions, in one or one tenth cubic centimeter portions with positive B-Coli determination on Eosin Methylene Blue Agar.

TOTAL NUMBER OF SAMPLES EXAMINED DURING 1932 -- 4673.

	PUBLIC SUPPLIES			PRIVATE SUPPLIES			BOTTLED WATER			PUBLIC CARRIERS			MISCELLANEOUS			TOTAL
	Good	Doubtful	Bad	Good	Doubtful	Bad	Good	Doubtful	Bad	Good	Doubtful	Bad	Good	Doubtful	Bad	
Deep Wells	1807	165	14	160	39	2	104	1		20	19		13	19	16	2379
Shallow Wells	415	48	1	415	212	41	20	7		5						1164
Dug Wells	13			7	19	4							1	2		69
Surface Treated	360	63	3	3	7											438
Surface Untreated	26	31	35	10	21	13										136
Springs	57	17	3	16	11	3	259	53								419
Cisterns				11	17	2									2	32
Unknown				17	16	3										36
TOTAL	2678	326	56	639	342	68	383	61		25	19		14	21	18	4673

During the period 1923-33 permits have been issued to the bottlers of water as follows:

1923	40	1925	40	1929	62
1924	33	1927	48	1930	68
1925	29	1928	61	1931	64
				1932	72

- Florida Section, American Water Works Association -

To coordinate the work of the Bureau and Water Works Officials and to encourage a closer relationship between the officials themselves, the Director of the Bureau in the fall of 1926, sponsored a meeting in Tampa at which the Florida Section of the American Water Works Association was organized. At the annual meeting of the Parent Organization in June 1927 the formation of the Florida Section was approved.

Successful conventions have been held annually at Hollywood, Orlando, Jacksonville, Gainesville and St. Petersburg.

A further expansion of the Section resulted when the University of Florida was prevailed upon to put on a trial "Short Course in Water and Sewerage", immediately preceding the Gainesville meeting in 1930. The second Short Course was held during March 1931 in conjunction with the Annual Section meeting at West Palm Beach.

The above paragraphs concerning water supply problems treat only in a very general way of the activities of the Bureau along this line with no mention of special investigations made.

- SEWERAGE AND SEWAGE DISPOSAL -

There is probably no branch of Public Health endeavor of greater importance than the proper treatment and disposal of human wastes. This work relates to (1) Municipal sewerage and sewage disposal plants, (2) Sewerage and Sewage Disposal for industrial plants and institutions, (3) Soil pollution and (4) the proper disposal of waste at individual homes and schools.

The policy of the Bureau is to work with cities and towns and their engineers in the matter of sewerage and sewage disposal, and to encourage them to submit plans and specifications for sewerage and sewage disposal plants for examination and approval to the Bureau before actual work is started. Upon receipt of a set of plans, or information as to their preparation, a review is made of them in the office followed by a field trip and inspection of the site of proposed treatment plant pumping station, etc. This field trip is made in company with the designing engineer or other officials. The Bureau is then in position to give list of recommendations or changes.

The matter of sewage disposal at schools is a problem with which the sanitary officers of the Bureau are constantly faced.

In the rural areas where septic tank disposal is not possible, privy installations are necessary and a complete booklet on the matter of approved types of privies has been prepared by the Bureau and widely distributed.

There is a great need of definite legislative action which will give supervision and control of sewerage and sewage disposal work insofar as they affect the public health to the State Board of Health.

- SCHOOL SANITATION -

The Bureau since its inception has been charged with School Sanitation work and one of the most difficult problems in this connection has been the problem of the sanitation of rural schools.

Surveys have been made on specially prepared forms of all the public schools in several counties during the last few years, and upon completion of the survey a complete report is compiled and submitted to the Board of Public Instruction with recommendations for the needed repairs or installations.

To keep a check on new school buildings and see that the necessary sanitary facilities including water supply and sewage disposal are properly installed the Board adopted Rule 101 which became effective March first, 1930. This rule requires that all public or private schools in the State having four or more class rooms and accommodating more than 125 pupils shall be provided with adequate water supply and sanitary facilities. Municipal or deep well supplies are to be used and only flush type toilets, urinals, and lavatory installed, properly connected to the city sewer, or a sewage treatment tank of design and construction approved by the Bureau. Plans are submitted before construction work starts.

In rural areas where schools cannot be provided with the sanitary features mentioned for larger schools, privies of the approved pit type are recommended, and the water supply from properly protected, driven or drilled well, delivered to the pupils in a sanitary manner is insisted upon. Consolidations of the one and two teacher schools into larger better equipped schools by trustees and Boards of Public Instruction have resulted in many instances, according to recommendations following the work of County School Surveys by this Bureau.

- INSTITUTIONAL SANITARY INSPECTION -

Following the creation of the State Board of Public Welfare by the 1927 legislature, the State Board of Health is required to make Medical and sanitary inspections of all boarding homes for children, orphanages and institutions where children remain over night. Boarding schools are not included. These inspections precede the granting of a license by the Welfare Board and include a detailed record of all sanitary features of the institution covering the following items - construction, cleanliness of structure and equipment, illumination, ventilation, crowding, water supply, milk supply, including dairies, work shop for industrial hazards, protection against insect borne diseases, sewage disposal, food supplies, fire protection including drills, playground and recreational facilities. Following these inspections a detailed report is furnished to the Commissioner of the Board of Public Welfare.

Each year as routine duty, institutions are inspected to note improvements where recommendations had been made or in instances where licenses were not approved or where only provisional licenses were recommended.

- SWIMMING POOL SANITATION -

This phase of the Bureau's work has been steadily carried on since the legislature in 1919 enacted Chapter 7825, Laws of Florida No. 43 providing for the sanitation, healthfulness and cleanliness of swimming pools, public bath houses, bathing places, and the supervision of same by the State Board of Health.

In accord with the above Act, the Board passed Rule 42, which was drawn up by the Bureau and provides for the proper construction and operation of Pools in the State. Rule No. 42 provides that plans and specifications for all pools shall be submitted to the Bureau for review and approval before construction work is begun and a permit shall be obtained from the Bureau before the pool can be operated. Accordingly inspections are made as a routine matter and each year permits are issued to those swimming pools that warrant the

River and Lake bathing places each year are causing more and more concern due to increasing pollution as the immediate water shed builds up and city sewage enters the stream. For this reason river and lake bathing in many instances is advised against, and people are urged to use the approved swimming pools in their immediate vicinity. Space does not permit a list of the swimming pools here, however, such lists are prepared by the Bureau and supplied upon request. Permits are issued during the period 1923-33 as follows:

1923	18	1926	29	1929	54
1924	17	1927	47	1930	58
1925	28	1928	49	1931	59
				1932	58

- AUTO TOURIST CAMP SANITATION -

Due to its popularity with winter tourists, and now rapidly becoming an all-year-round playground, Florida has a distinct problem in the care of the visitors which come to the state in cars. The Bureau early recognized this fact and in 1921 passed regulations pertaining to camp sanitation. Rather than comply with the State Board of Health regulations the municipalities abandoned their camps and the privately owned and operated camp came into existence. At the close of 1932 tourist camps are practically 100% privately owned and operated. At one time an effort was made to have the county authorities control sanitation of camps, but this failed and the responsibility was then necessarily assumed by the State.

During 1926 the Bureau revised the 1921 camp regulations and the Board adopted Rule No.91, which briefly states that each camp must have:

1. A site well drained and of ample size subdivided into camping plots not over 30 cars per acre.
2. A camp attendant in responsible charge at all times.
3. Adequate supply of safe drinking water under pressure and conveniently distributed.
4. Safe sanitary methods of sewage and waste disposal - only flush type toilets permitted.
5. A supply of covered garbage cans and garbage properly disposed of.
6. Shower baths, and a laundry and car washing site.
7. Custodians building or office where registration of all campers must be kept on blanks supplied by the Bureau.
8. Their rules and Bureau rules prominently posted so tourists can read and obey.

This rule no longer permits privies to be used in camps and prevents overcrowding.

The 1927 legislature passed an Act pertaining to sanitation of tourist camps which is practically an enactment of the Board regulations. This Law was proposed and urged by the tourist camp association in cooperation with the Bureau. It also prohibits dogs, cats, etc., from running at large and makes it obligatory for the occupant of any cabin or tent to report to camp superintendent any sickness in the party. This law assists us greatly in carrying out our program.

Tourist camp control in the State of Florida is contrary to the procedure in most other states, where the enforcement of regulations is left to local health authorities. The Bureau has found that State control, free from local politics and prejudice, is far superior. All camps follow the same rule interpreted in the same manner - comply or go out of business.

The booklet "Tourist Camps of Florida", which was prepared by the Bureau covers the subject quite thoroughly and has been widely distributed. It serves as a guide for the prospective camp owners or operators and includes Rule No.91, also descriptive data pertaining to plans for proper camp equipment, septic tanks, general lay-out, etc.

The following list shows camps permitted during the last five years:

SEASON	NO. CAMPS	SEASON	NO. CAMPS
1927-28	213	1930-31	173
1928-29	178	1931-32	215
1929-30	163		

- MOSQUITO CONTROL -

One of the major activities of the Bureau for many years has been in assisting the communities with their mosquito and malaria problems. When the extent of this problem is once realized then the magnitude of the work involved becomes more apparent.

The geological and geographical structure of the State and its topography present factors not generally found in other states. Florida's tremendous shore line with hundreds of bays, bayous, sounds, rivers, keys, etc., and the attendant marshes and man-grove swamps along the coast, present problems of controlling varieties of the pestiferous salt-marsh mosquitoes.

In the interior of the state, wet pine flat woods, lime stone sink areas, more than 30,000 lakes, and miles of minor water-ways and marshes make conditions extremely favorable for the breeding of Anopheles mosquitoes, the principal vector of malaria.

The activities of the Bureau and the inauguration of a state wide campaign for mosquito control in Florida dates back to 1921-22. Some work has been done and considerable literature distributed relative to mosquitoes, but not until 1922 did any one division of the Board initiate control measures throughout the state. The booklet "Mosquitoes and Mosquito Control" was published by the Bureau in 1923 and the "Manual of Mosquito Control Program" was published by the Bureau in 1924. These booklets, arrangement of mosquito control programs and surveys made in towns and cities with newspaper publicity were some of the earlier undertakings of the Bureau.

Upon the recommendation of the Bureau the Board during 1928 passed Rule No.96 relating to the impounding of waters in the State and placing the jurisdiction of same under the Bureau.

The booklet "Mosquito-Proofing Your Home" was published by the Bureau in 1930 during the screening demonstration which was carried on by the Board at that time.

The Legislature in 1925 enacted a law pertaining to the Organization of mosquito control districts in the state. These districts are formed by petition of the free-holders followed by an election to allow a levy for anti-mosquito work. Mosquito control districts have been formed in St. Lucie, Indian River and Pinellas Counties. During the latter part of 1932, the counties of Palm Beach, Broward and Dade, were considering formation of a District.

The District Sanitary Officers of the Bureau are very active in closely watching all new mill and lumber installations to see that the quarters are properly screened before the families go into them. Mill owners have been found quite willing to do this work in an effort to keep down sickness in the camp.

The subject of mosquitoes and their control would be incomplete without mention of the Florida-Anti-Mosquito Association. This organization, sponsored and fostered by the Bureau, is now entering its eleventh year of activities and has held annual conventions in Daytona Beach, St. Petersburg, Bartow, Cocoa, St. Augustine, Hollywood, Jacksonville, Ft. Pierce, Sarasota, Perry and Clearwater. Organization meeting was held in Daytona Beach - December 1922.

This association is not a very scientific body, but more of an experienced group where those engaged in the work or interested in it meet for a day and a half each year to exchange ideas and discuss programs for the coming year. The Association has been fortunate in enlisting the interest of speakers with national reputation, who have given the delegates the latest scientific advances concerning the work.

- WASTE ARTESIAN WATER -

The Legislators of 1929 enacted legislation regarding the control of waste water from free flowing artesian wells in Manatee and Sarasota Counties. Realizing the serious drain upon one of our most precious natural resources the entire force of the Bureau was placed at the service of the State Geologist, Mr. Herman Gunter, who was charged with enforcement of the Act. Our District Sanitary Officers were directed to locate wells and to carry out instructions of Mr. Gunter. In the vicinity of Estero serious damage to crops occurred by the lowering of the water table so that the wells ceased to flow. Danger from salt infiltration was expected when one property owner put pumps on his wells. Rainfall arrived late in the season, however, and temporarily relieved the situation.

Florida must not permit this artesian water to flow to waste. The costly lessons of the truck farmers in the southern part of the state was indeed a bitter experience. Reasonable use of this natural resource is to be permitted but waste must be stopped. Wells at abandoned saw-mill towns, wells formerly used for cattle watering and deserted turpentine camps, must be capped or plugged. The Bureau is cooperating to the utmost with the State Geologist in this matter.

- CANNERY SANITATION -

Canning plant sanitation and the disposal of the waste at canneries developed to such a problem that the Bureau in 1930 drew up rule 99 which was passed by the Board during the spring of that year. This rule relates to the Sanitation and operation of all commercial canneries, juice extracting plants, preserving plants, and establishments, packing cooked or processed food designed for human consumption. It provides that the physical feature of the plant must be such that contaminating influences are kept at a minimum. Helpers must have clean clothing, rest rooms must be clean, flies and insects excluded and utensils used in the preparation of the fruit or other material must be kept clean. Waste must be properly disposed of and the water supply must be of a satisfactory quality.

Monthly or more frequent inspections by the Bureau Sanitary Officers are made of each cannery in the State, and if the boards requirements are met permits are issued.

In canning plant sanitation or in Rule 99, the bureau does not concern itself with the chemical or the bacteriological quality of the food either before or after packing it, this matter coming under the jurisdiction of the State Department of Agriculture. The State Board of Health has no standards for the quality of the material packed, nor rules pertaining to the washing of fruits and vegetables before canning.

The U. S. Department of Agriculture representatives and the Florida Department of Agriculture inspectors, have always given the Bureau their willing cooperation, and the City Food Inspectors in the State have worked with our Inspectors in several cases.

- RABIES -

The Bureau has been called upon in every district of the State to investigate reports of rabid dogs, cats and other animals and inaugurate measures to prevent spread of this disease.

Sometimes such investigations require only simple inquiries, but at other times quarantine over a wide area has been found necessary to determine whether additional animals have been affected and prevent the spread of the disease from such cases.

Many cities of the state have ordinances requiring the licensing of dogs, the requirement for license being the presentation of a certificate from a qualified veterinarian that such animal had been vaccinated against rabies during the current year. It is seldom that the ordinance is enforced unless a rabies scare forces the city authorities to such action, but it is believed that the proper enforcement of vaccination is the only means of effectually stamping out this disease.

The District Sanitary Officers cooperate with local police authorities in all communities where rabies control measures seem necessary and no doubt unless more effective local control work is done some State measures will have to be adopted and a state-wide vaccination program engaged in.

- DRAINAGE WELL SANITATION -

The practice of disposing of excess sewage water, sewerage and storm water, into the underground strata, and the utter disregard of the pollution of the underground waters of the state, has been a matter which has given the Bureau considerable concern. The use of drainage wells for this purpose constitute a source of ever constant danger to our small deep well supplies. When communities found that they could dispose of the surface water and ever sewage, after tank treatment, in this manner the use of drainage wells especially in the central part of the State, became a regular practice. Thousands of acres of truck land are irrigated or drained as necessity dictates, by wells leading to the underground waters. We find lake levels controlled by drainage wells to prevent damage to roads, groves or homes, - we find roadside ditches drain into drainage wells to lower the water table on the right-of-way. The cities of Ocala and Orlando dispose of their storm water and sewage through drainage wells.

Activities along these lines have been confined largely to Orange, Marion and Dade Counties.

The only hope of the Bureau to prevent the increasing use of such wells has been rigidly enforced by the Act of the Legislature of 1913 pertaining to the "Protection of the Underground Waters".

The policy of the bureau has been to permit no more sewage wells unless preliminary treatment is given the sewage. Another policy adopted by the Bureau has been that no permits will be granted unless requested in writing.

In accord with this procedure the Bureau has available a record of all wells their size, location, purpose, etc., and from the logs submitted the State Geologist has a record of the rock formation encountered.

During 1931 copies of our drainage well locations throughout the state and the dates of permits issued by the Bureau over the past several years were given to the representatives of the U. S. Geological Survey who were engaged in a study of the Underground waters of the State.

- OTHER CAMP SANITATION -

Regular inspections are made by Bureau District Sanitary Officers of Boy Scout, Girl Scout, Y. M. C. A., Y. W. C. A., Construction and Mill Camps that operate in the State. Items covered in these inspections are:

1. Water Supply.
2. Sewerage and Sewage Disposal.
3. Cleanliness of Kitchen
4. Source of Milk Supply.
5. Menus in use.
6. Screening.
7. Cleanliness of bunks, tents, cottages, etc.
8. Safety devices at Swimming Places and first aid services.
9. Prevalence of Mosquitoes, flies, etc.
10. General Sanitation.

Inspectors of the Bureau are ever on the alert to note any new camps being installed, also check the operation of camps that are already being used and those that are permanent establishments.

- COUNTY FAIR OR CARNIVAL SANITATION -

In the counties of the State where annual fairs are held, it is a practice of the Bureau to have the District Sanitary Officer in those counties present at all times, to supervise the sanitation of same.

- GARBAGE DISPOSAL -

Since garbage disposal is not considered a strictly health problem, and the cities in the state are active in providing proper disposal plants for this waste this matter has not given the Bureau much concern during the last few years. Few complaints have been received relative to improper

garbage disposal and when any irregular condition is found at City disposal plants the City officials have always taken prompt action to have same corrected. Garbage incinerator plants are located at the following places in the State:

Clearwater	Lakeland	Sebring
Coral Gables	Lake Worth	St. Petersburg
Daytona Beach	Miami	Stuart
Ft. Myers	Ocala	Tampa
Ft. Pierce	Orlando	West Palm Beach
Gulf Port	Palatka	Winter Park.
Jacksonville	Palm Beach	

Installations of the Becarri method of garbage disposal are found in the state at Belleair, Dunedin, South Jacksonville and Plant City.

- MILK AND MILK SANITATION -

The Bureau for many years has been carrying on a small milk sanitation program in cooperation with municipal authorities using the simple dairy regulations adopted by the Board in 1919 which in condensed form provided as follows:

1. The water used shall be safe.
2. At least a sanitary privy shall be used for excrete disposal.
3. Milk house shall have cement floor, smooth finish inside walls and screened doors and openings.
4. Dairy barns must be clean, well lighted and ventilated, and have cement floor.
5. Manure shall be removed following milking and properly disposed of.
6. Cows, shall be clean, free from disease, tuberculin tested, etc.
7. Only dry hand milking into fish mouth pails permitted.
8. Utensils shall be cleaned and sterilized and protected from dust and flies.
9. Pasteurizing shall be done between 142° and 145° F. for from 30 to 45 minutes with temperature recording thermometer and chart on pasteurizer.
10. Milk must be delivered within two hours or cooled to 50° F. or less.
11. Communicable disease in the dairy or in the family of persons handling milk shall be reported to nearest health authority.

The enforcement of these regulations has usually been at the request of city authorities and numbers of dairies have been inspected and scored in the past.

For several years the Bureau has recommended the adoption of the U. S. Public Health Service Milk Ordinance as the Board has looked with favor on this ordinance as a standard.

At the 1929 session of the legislature a statewide milk bill was enacted and at the 1931 session this was replaced with another giving joint jurisdiction in the enforcement of its sanitary provisions to the Department of Agriculture and State Board of Health.

The law was intended primarily as a milk labeling act and was limited in its application to dairies of more than five cows and the enforcement was left entirely with the department which sponsored it.

A statewide milk conference was called by the State Health Officer in 1930, the Bureau being charged with arranging the details of the meeting. The conference was very successful, being attended by representatives of the Department of Agriculture, State Livestock Sanitary Board, U. S. Public Health Service, State Dairymen's Association, City representatives and the State Board of Health, and was the forerunner of an offer from the U. S. Public Health Service to make a statewide study of milk sanitation and Dr. Clarence E. Smith, Milk Specialist, was detailed for this duty.

This survey covered the milk supply of 73 cities and detailed reports of inspections were furnished to the city officials by the Service. Following the completion of this study a number of cities adopted the Standard Milk Ordinance, which was used as a yard stick for measuring the milk standard. At the end of 1931, twenty cities had adopted this ordinance.

On March 23, 1932 the Board recognized the soundness of the Bureau milk sanitation program and adopted the U. S. Public Health Service Milk Ordinance as the Standard Milk Ordinance to be recommended to the towns and cities for adoption. The Bureau was then reorganized, reducing the number of sanitary districts to six, releasing one sanitary officer for milk sanitation. Courtesies were extended in three neighboring States permitting observations of actual control work and the U. S. Public Health Service again offered cooperative assistance in the uniform application of the Standard Milk Ordinance.

The Bureau representative engaged in this work is now carried as a milk and dairy specialist and particular stress has been devoted to uniform enforcement methods. Milk sanitation is recognized as a function of the individual communities and its enforcement is charged to local officials.

The program of the Bureau consists of the following functions: (1) promoting the adoption of the standard milk ordinance; (2) assist in training new local milk control personnel; (3) assist in organizing local enforcement; (4) provide expert advice on special technical problems; (5) rate the milk sanitation work of each local health department twice each year.

No special effort has been made to increase the number of cities operating under this program until it is felt that the work is properly organized and functioning in a uniform manner in those cities where it has been accepted. These numbered twenty-four at the close of 1932.

- SHELLFISH SANITATION -

The U. S. Public Health Service Minimum requirements for approval of state shellfish control measures and certification for shippers in interstate traffic, and the State Board of Health Rule 102 passed in 1932 are the basis for all shellfish sanitation work of the Bureau.

Oyster certification had its beginning in 1925 following the outbreak of a large number of typhoid fever cases in Chicago, New York, Washington and 10 other large cities in the eastern part of the United States during the winter of 1924-25.

From 1926 to 1931 only interstate shippers of shellfish were required to be certified, but with the inauguration of the 1932-33 season certificates were also issued to intrastate shippers. A model ordinance to be adopted by towns and cities is recommended by the Bureau and provides that local dealers shall:

"Section One- All shippers, re-shippers, packers and wholesalers of shellfish shall keep an accurate record; subject to inspection by proper officials, of all lots received, shipped and sold. All retailers shall keep an accurate record, subject to inspection by proper officials of all lots received.

Section Two- That no shellfish shall be gathered, handled, stored, sold, produced or offered for sale, within the corporate limits of the City of _____, except those produced and handled in accordance with the rules and regulations of the state agency having jurisdiction over the same.

Section Three- That all dealers in shellfish, within the corporate limits of the city of _____, including producers, handlers and hucksters, shall be required to secure permits from the health department of the City of _____, said permits to be issued only to persons, firms or corporation who handle shellfish from sources certified by the State agency having jurisdiction and approved by the United States Public Health Service. Said permits shall be for maximum period of one year and shall terminate annually on October first, and may at any time be renewed in accordance with the conditions stated herein.

Section 4. It shall be unlawful for anyone to sell or offer for sale, to store or hold for sale, shellfish within the corporate limits of the City of _____, without a permit from the Health Department as required above.

Section 5. Shell oysters and clams shall be handled under such temperature conditions as will keep them alive; that is, at a temperature below 50° F. but above freezing.

Section 6. For refrigeration of shucked stock, outside containers should be provided for ice, and no ice or other foreign substance shall be allowed in contact with the shellfish. Shucked stock should be kept at a temperature of 50° F., or below, from the time it leaves the shipper until it reaches the consumer, but should not be allowed to freeze.

Section 7. All shucked stock received by wholesale or retailers shall be kept in the original sealed containers, which shall not be opened except as required for dispensing by the retailers."

Operating under this ordinance city health departments have little difficulty in controlling the handling of oysters and the public is assured that the stock is produced and handled in an approved sanitary manner.

To receive a certificate and code number, with which all shipping containers are marked, all of the requirements of Rule 102 of the State Board of Health must be complied with. As plants meet these regulations certificates are sent to Washington where they are approved by the U. S. Public Health Service, if the methods of the Bureau and of the State Shellfish Commissioner are satisfactory. The names and code number of the firms or individuals are then placed upon an approved list of plants and distributed to city and state health authorities throughout the United States.

During the spring of 1928 a detailed survey was made of the waters of Hillsborough Bay which receives the sewage of the City of Tampa and the drainage of the Hillsborough River and certain areas were closed for oystering. This was the first of numbers of surveys which have been conducted since that date. Cooperation of the U. S. Public Health Service and city health departments is acknowledged in many of these surveys. Others have been conducted by Bureau personnel alone, but every assistance has always been rendered by the State Shellfish Commissioner. These surveys have resulted in the establishment of 12 restricted or condemned areas to date. These areas are closed by executive order of the State Health Officer. The State Shellfish Commissioner establishes regular policing routine to prevent the removal of shellfish from such areas. Appropriate signs showing the boundaries of the restricted areas have been erected with the cooperation of the Shellfish Commissioner.

Through the procedure adopted there has been a very decided drop in the number of cases of intestinal diseases in certain areas of the State. A further extension of this work is desirable, but this can only be obtained by legislative action, making it unlawful to offer for sale anything but certified oysters.

These surveys covers only the major producing areas and no effort has been made to determine the extent of pollution in waters where smaller quantities of shellfish may be taken for individual use.

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Regular monthly inspections are made of all oyster shucking plants, shellstock shippers, clam shippers, etc., and samples are examined bacterially according to standard practice.

- SPECIAL REPORTS OF INVESTIGATIONS -

During the period 1923-33 the Bureau, in addition to routine duties, had prepared special reports on investigations and surveys in accord with the following list. Copies of these reports have been sent to the State Health Officer, as well as to the Organizations, Municipalities, or individuals concerned.

1923

Mosquito Control Inspection Live Oak.
Water Supply Survey with State Geologist Live Oak
Annual Report of Bureau

1924

Report on Winter Haven Sewage Disposal Investigation.
Water Supply Investigation at Bradenton.
Malaria Survey-Hillsboro Co.
Hillsboro River Plans Review.

1925

Report of Activities of the Bureau of Engineering
Dengue Fever in the City of Miami
Investigations of Fenholloway Springs Bottled Water
Report of water supply investigation, St. Petersburg.
Municipal Supply - June 5th.
School Survey of Glades County.
Mosquito Survey Palm Beach Co.

1926

Sanitary Survey Tampa.
Fenholloway Springs Investigation.
Mosquito Control Investigations.

1927

Sanitary Survey Stuart
Sanitary Survey Lake City
Sanitary Survey Winter Haven
Mosquito Survey Tallahassee
Sanitary Survey Clearwater
Investigation Ice Plant Marianna
Florida Industrial School for Girls - Report.
Sanitary Survey Arcadia
Sanitary Survey Punta Gorda.

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1928

Sanitary Survey - Frostproof
Sanitary Survey - Fort Meade
Sanitary Survey, Sebring
Sanitary Survey, re Sewerage and Water, Baldwin.
Mosquito Survey, Dade County (Cooperation of U. S.
Public Health Service.
Sanitary Survey Mulberry
Sanitary Survey, Plant City
Sanitary Survey, Ocala.

1929

Sanitary Survey Tallahassee and Leon County
Fly Nuisance in Groves Lake Alfred
Report Mosquito Survey Gainesville, (University of Florida)

1930

Mosquito Survey Marianna
Mosquito Survey Broward Co.
Mosquito Survey Palm Beach Co.
Salt Springs Water Marion Co.
St. Johns County - Mill Creek - Construction Work.
Mosquito Survey Sarasota Co.
Mosquito Survey Pinellas Co.
Malaria and Hookworm Demonstration Work.

1931

Tampa Southwest Urban Areas - Tampa
Oyster Sanitation Investigation Pensacola
Cold Pack Strawberry Plants, Plant City
Mosquito Survey City of Gainesville.
Water Supply Investigation P. & O SS. Co. Havana, Cuba.
Investigation Pensacola Bathing Beaches.
Water Supply investigation, River Junction.
Mosquito Investigation & Drainage Lake Henrietta Tallahassee.
Survey Relative to Sewage Disposal of U.S. Veterans Home,
St. Petersburg.
Annual Report of Bureau.

1932

Ocala - Marion County - Sanitary Survey.

Following is listed Publications which have been issued by the Bureau during the 1923-33 period.

The Sanitary Privy
The Filthy Fly
Tourist Camps in Florida
The Sewage Treatment Tank
Mosquito Proofing Your Home
Mosquitoes and Mosquito Control.
Manual of Instructions on Mosquitoes & Mosquito Control.
Water Supplies of Florida.
Home Sanitation
The Sanitary Condition of Incorporated Cities of Florida - 1927.
Cannery Regulations.
Chemical Character of Waters of Florida, in cooperation with U. S. Geological Survey.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Stewart G. Thompson, D.P.H., Director.

PREAMBLE

The purpose of this report is to cover the Bureau's activities from 1923 to date. The last published report was the biennial of 1921 and 1922. While it will not be possible to include in this report of ten years all of the detail information usually contained in an annual report of vital statistics, summaries of the more important subjects will be submitted in order to fill in as far as possible the gap since the last published report. Activities of the Bureau will include the calendar year 1932; however, the statistical information will end with the year 1931 as the 1932 tabulations will not be completed for several months.

CONTENTS

Activities of the Bureau; graphs for a few of the more important causes of death, Florida as compared with the United States Registration Area, 1917 to 1931, inclusive; deaths and death rates for Florida for certain leading causes of death, 1923 to 1931, inclusive; population, births, deaths, infant mortality, stillbirths and illegitimate births by counties and cities for 1931; marriages and divorces by counties for 1931; and deaths from a few of the more important preventable diseases by counties for the past five years. Information desired but not included in this brief statistical summary for the past decade may be secured by request as all of the customary tabulations and analyses have been prepared but could not be included in this report.

NEW LAWS

Acts of 1927 provide for the centralization of marriage and divorce records. The county judges have been required since the mid-year of 1927 to record all marriage licenses in their county record books, give the date of filing and forward the original marriage licenses to the Bureau of Vital Statistics. The clerks of the circuit courts have been required to transmit to the Bureau of Vital Statistics a record of each and every decree of divorce granted by said courts.

Acts of 1927 require the registration of all physicians, surgeons, osteopaths, chiropractors, naturopaths and all others practicing the medical and/or material healing arts in the state of Florida annually.

Acts of 1929 provide for the registration of births or deaths occurring prior to the Act creating the Bureau and the filing of certificates of births or deaths that were not filed at the time of birth or death, provided affidavits are presented and such proof filed as the state registrar may deem advisable or necessary to establish the truth of the facts endeavored to be made of record by the certificates.

ORIGINAL RECORDS

During the past decade, 305,761 birth certificates and 195,529 death certificates have been filed. Since the mid-year of 1927, there were filed 93,201 marriage licenses (including the date the marriage ceremony was performed) and 19,214 divorce and annulment reports. There were 41,315 certified copies issued from 1923 to 1932, inclusive.

CENTRAL BUREAU OF VITAL STATISTICS

NOTICES TO NEW MOTHERS

On receipt of the original birth certificate, a notice is sent to the new mother advising her of the fact that the original birth certificate has been filed, giving the official file number and instructions as to the importance of birth registration and advising her that should the record of her baby's birth be required at some future date, a certified copy may be secured from the State Board of Health.

ANNUAL REGISTRATION - HEALING ARTS

Individuals licensed to practice the healing arts in Florida have complied unusually well with the Acts of 1927 requiring their annual registration with the State Board of Health. A printed roster has been issued each year giving the names in alphabetical order and addresses of practitioners and also giving their names by cities. This published roster has been mailed each year to every individual who registered.

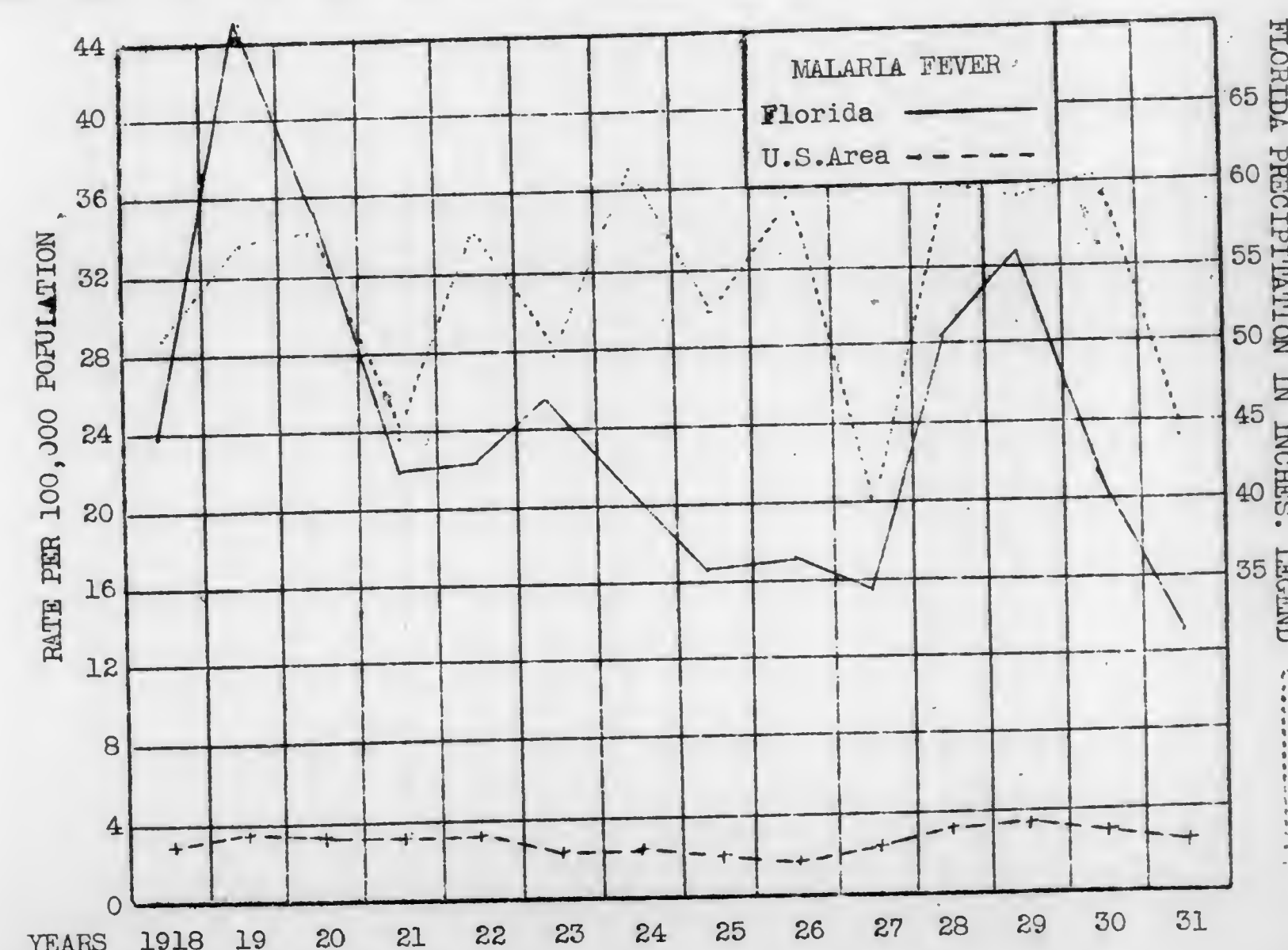
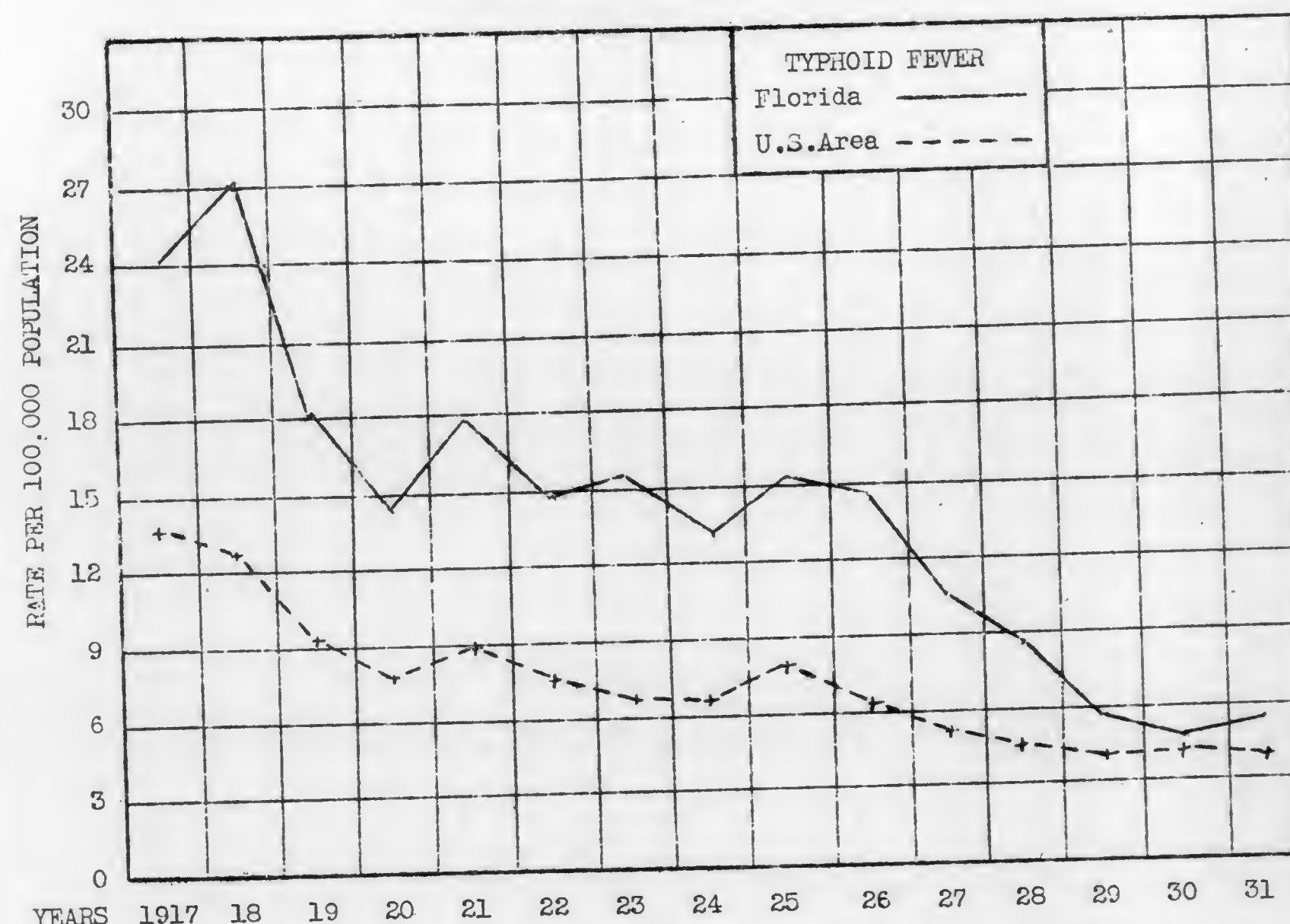
ALLOCATION OF NON-RESIDENTS

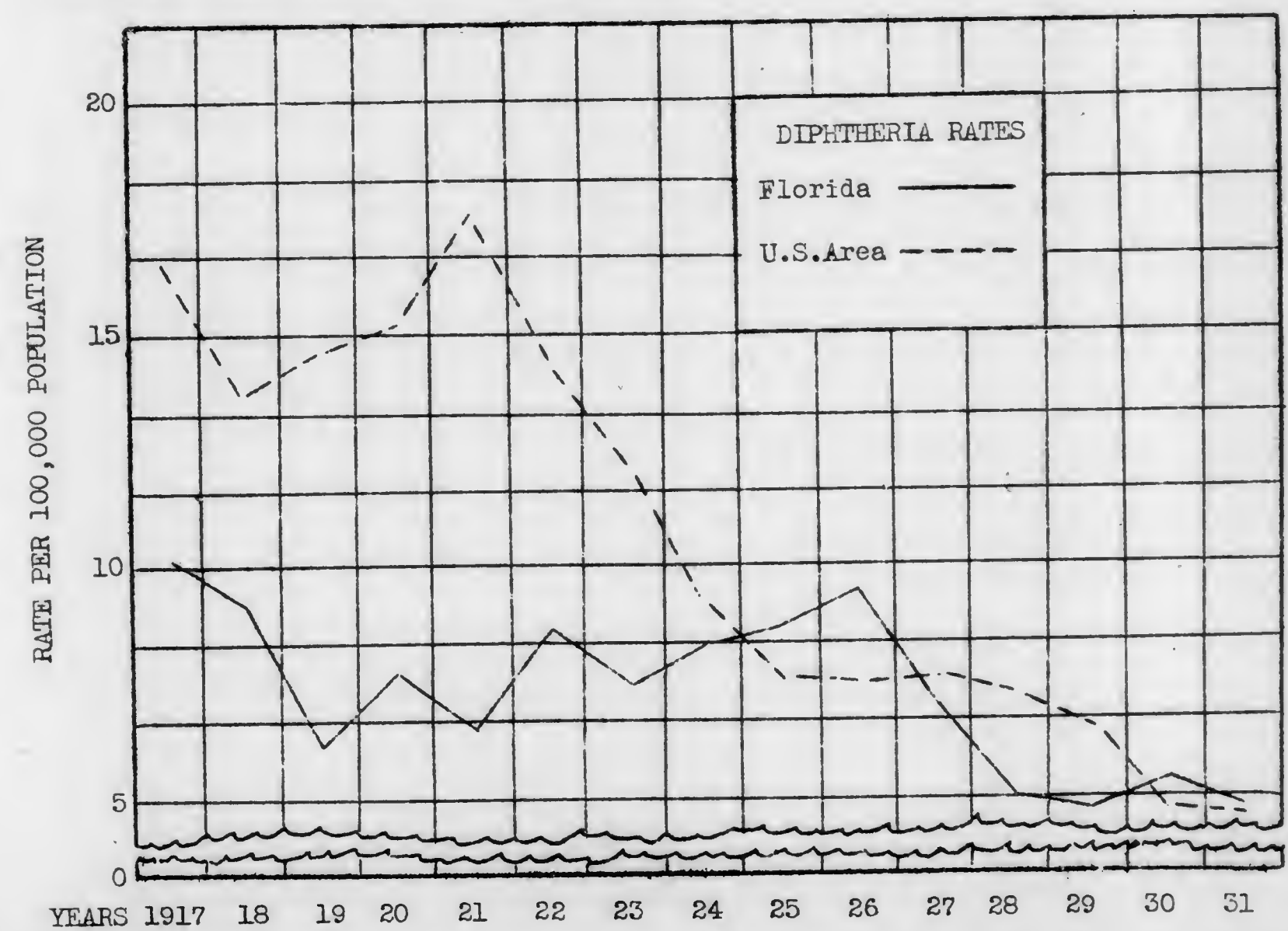
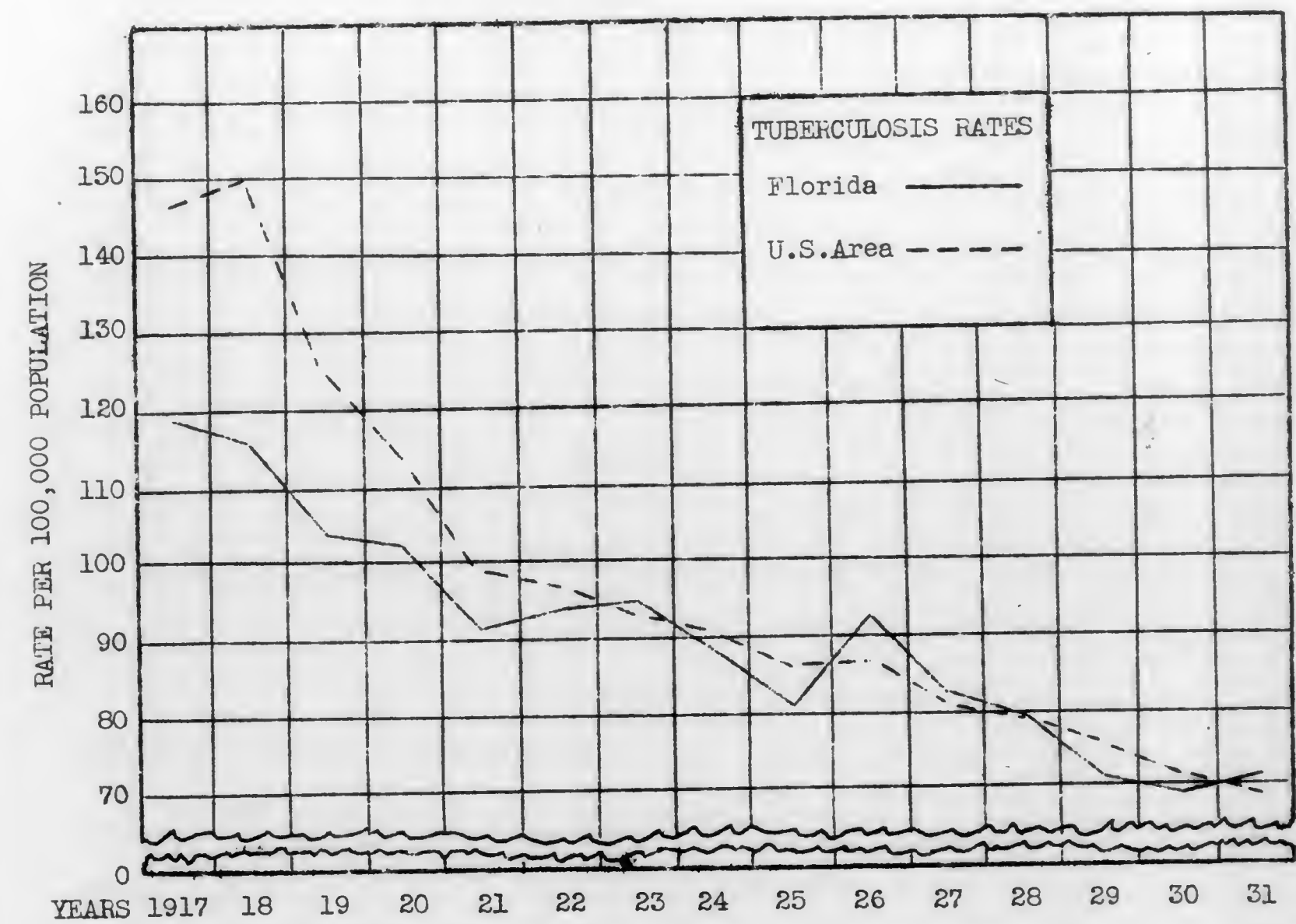
The allocating of non-resident deaths and births is a very important question that has perplexed statisticians for many years. Through the cooperation of the United States Bureau of the Census, which has agreed to act as a clearing house, a plan has been put into operation whereby every state secures a record of the deaths of their residents occurring outside the state. Through this method, it is possible for a state, city or county to publish a resident death rate by accepting records of deaths of residents who died elsewhere and charging off non-resident deaths occurring locally. This arrangement became effective for 1931 so that a new and more accurate form of tabulations will be available for comparisons. Very much the same method is used in connection with birth records; the residence of the child to be given the same as that of the mother regardless of where the birth may have occurred.

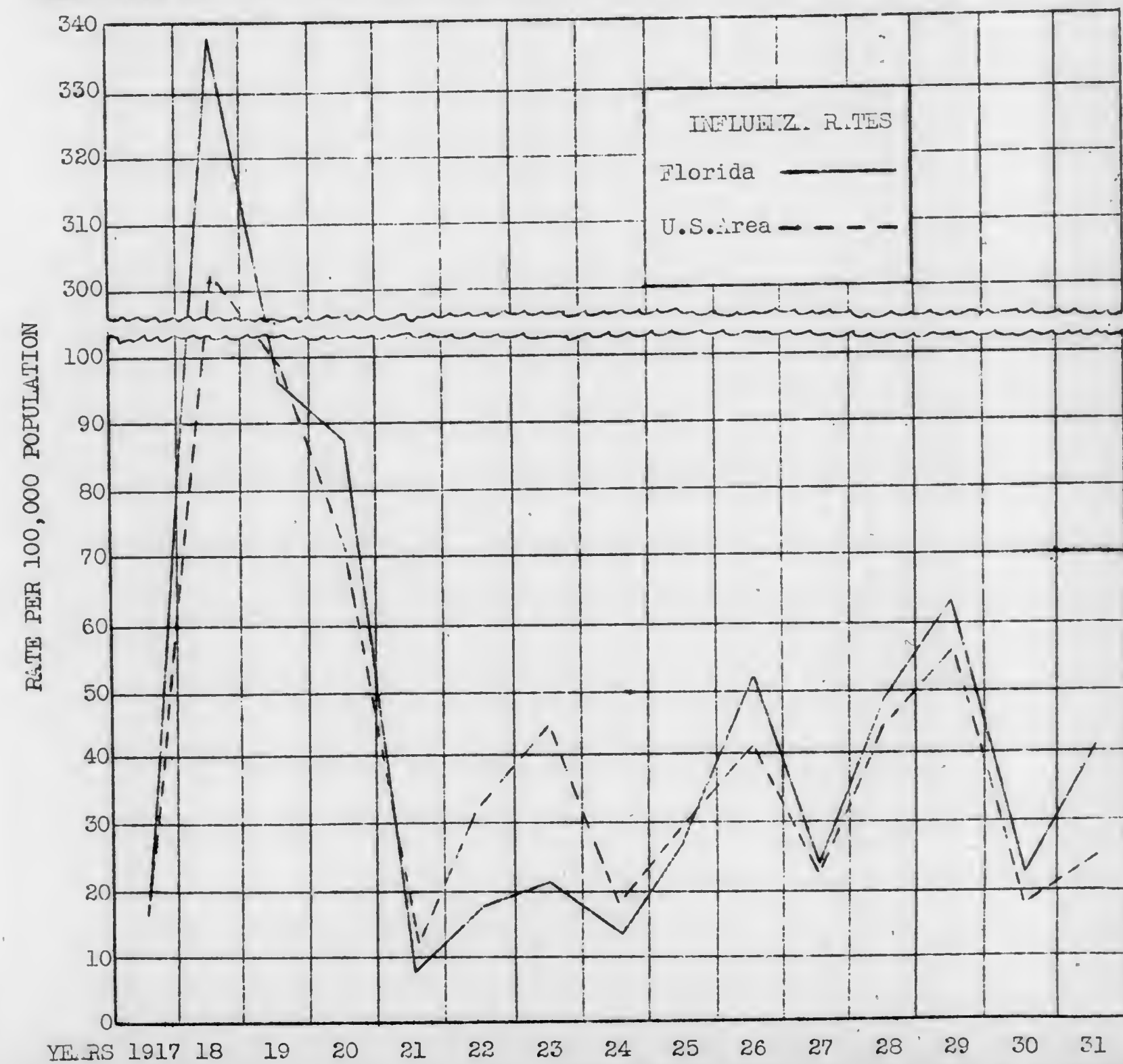
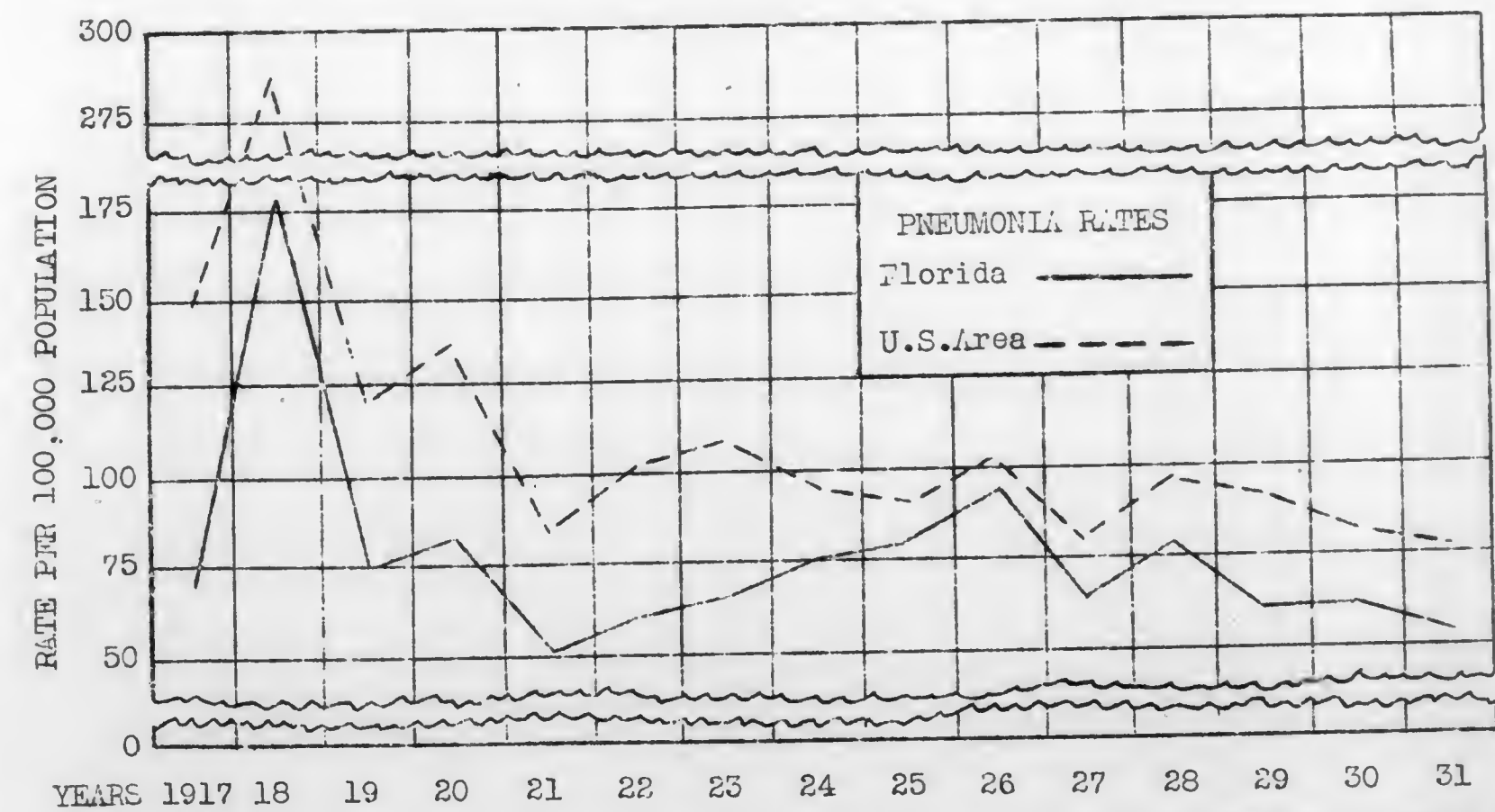
OFFICE SPACE INADEQUATE

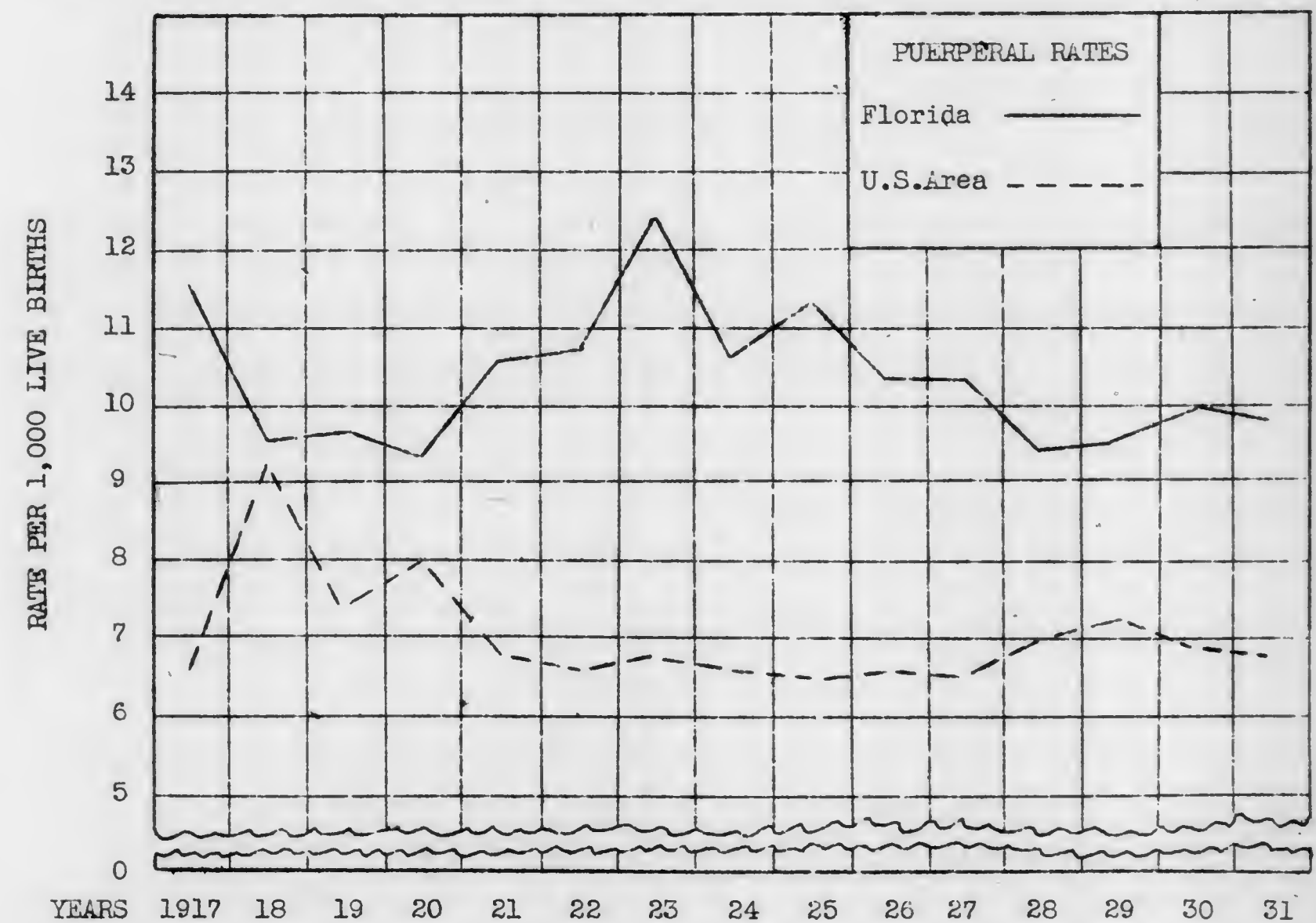
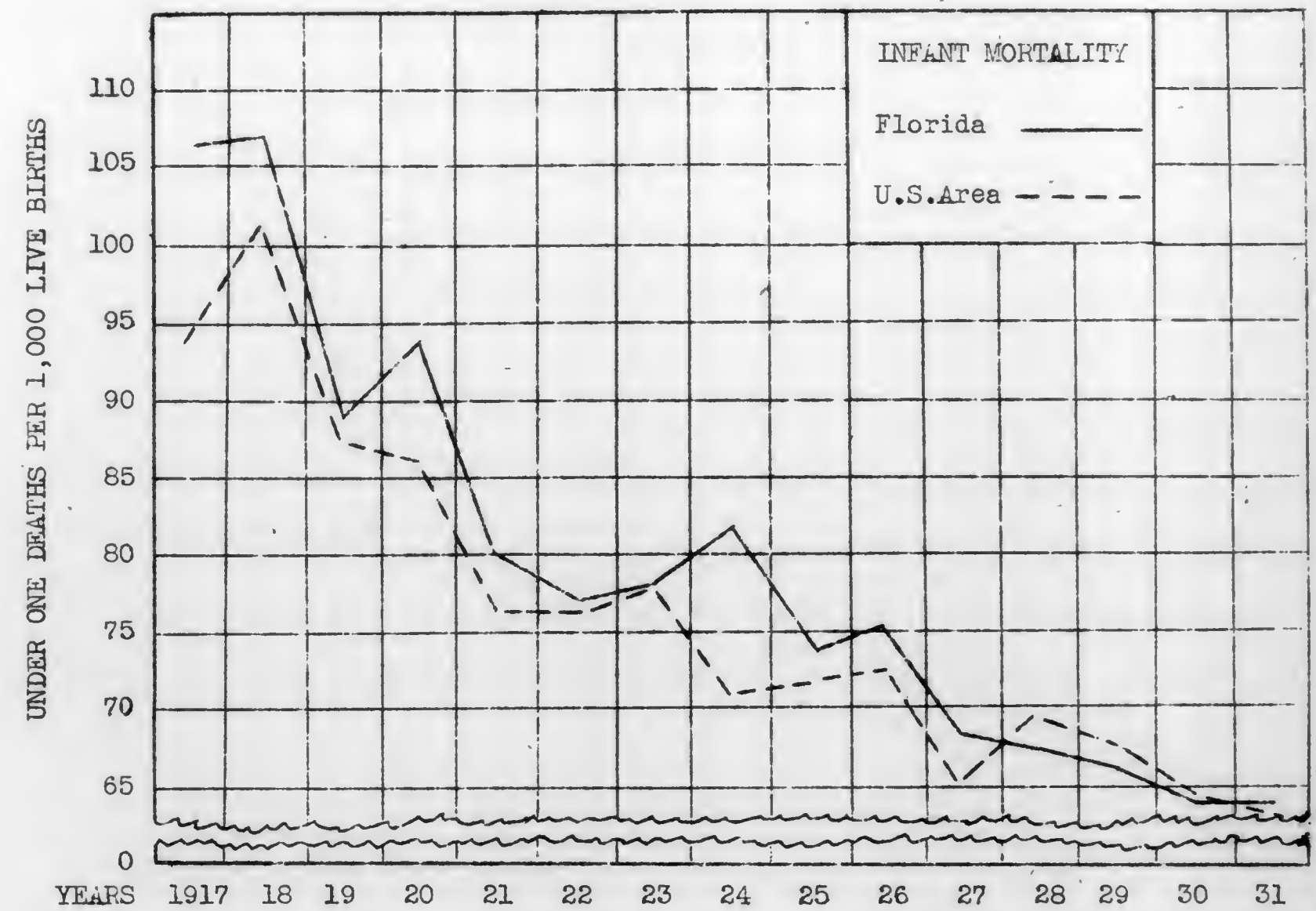
The growth of the Bureau may be visualized by the increase in the number of original records filed. The Act creating the Vital Statistics Bureau requires a fire-resisting vault to house the records and further provides that all records shall be indexed by a continuous card index file system. The index file requires steel stacks and other equipment and finally completely filled the office space. Original records, files and equipment could not be housed in the vault and rooms provided which necessitated the utilizing of hall space, basement and attic as an overflow. In February, 1930, the state health officer recommended to the State Board of Health that the Bureau of Vital Statistics seek floor space outside of the State Board of Health building as a temporary measure and office space was, therefore, secured on the fourth floor of the Florida Theatre Building; said building being Class "A" which provides concrete floors and ceilings in which fire-resisting vaults were provided.

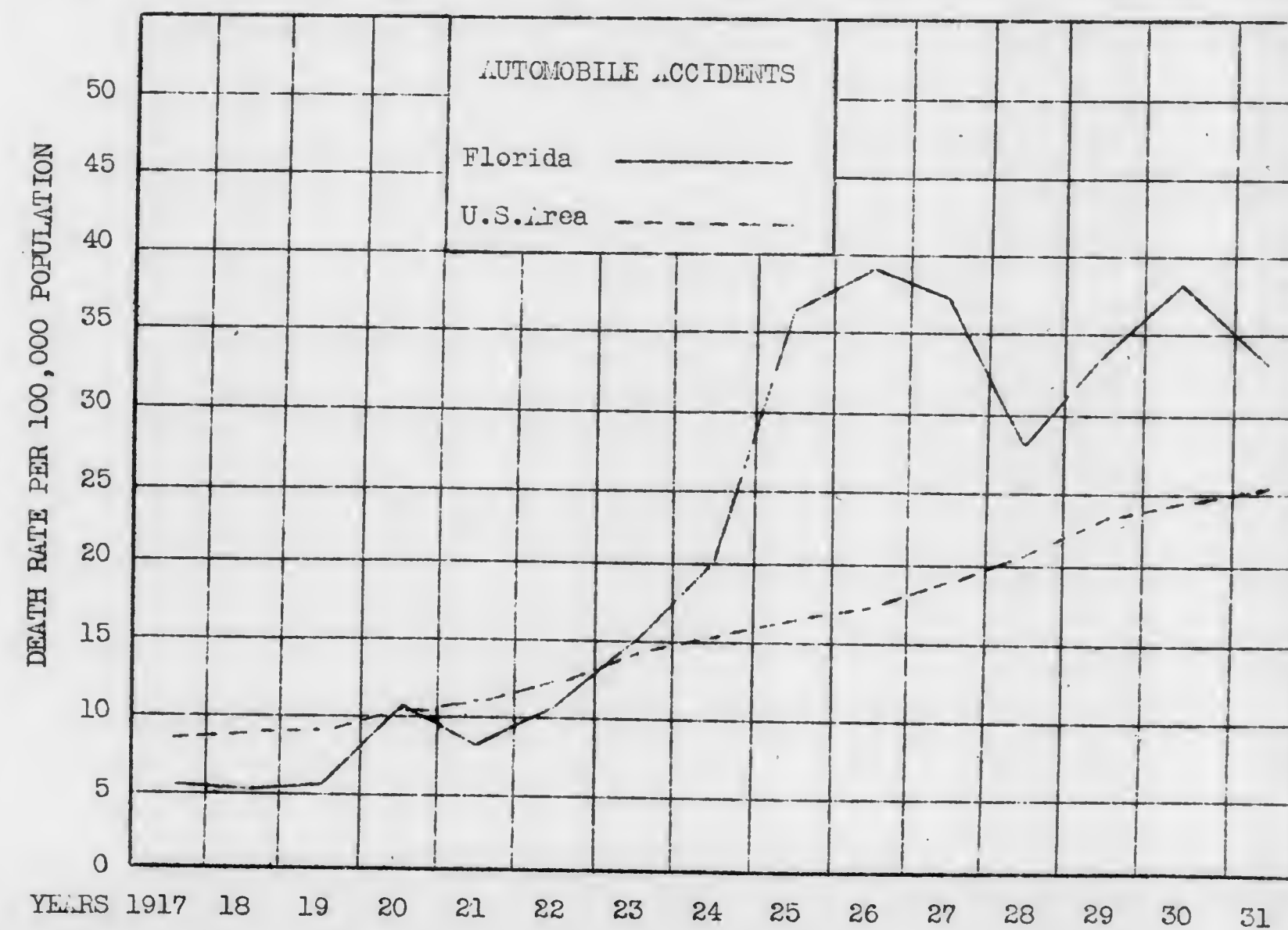
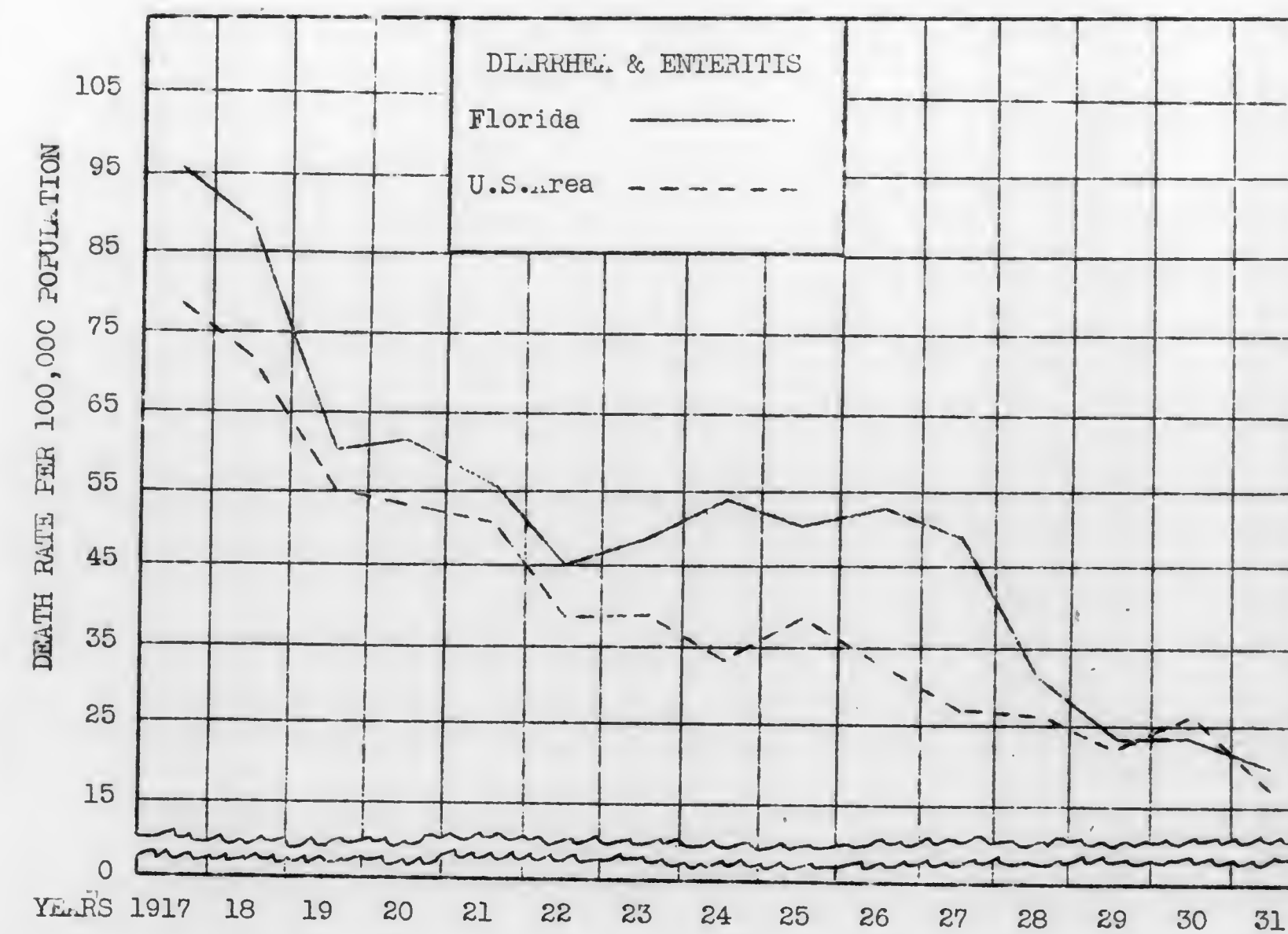
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CENTRAL BUREAU OF VITAL STATISTICS



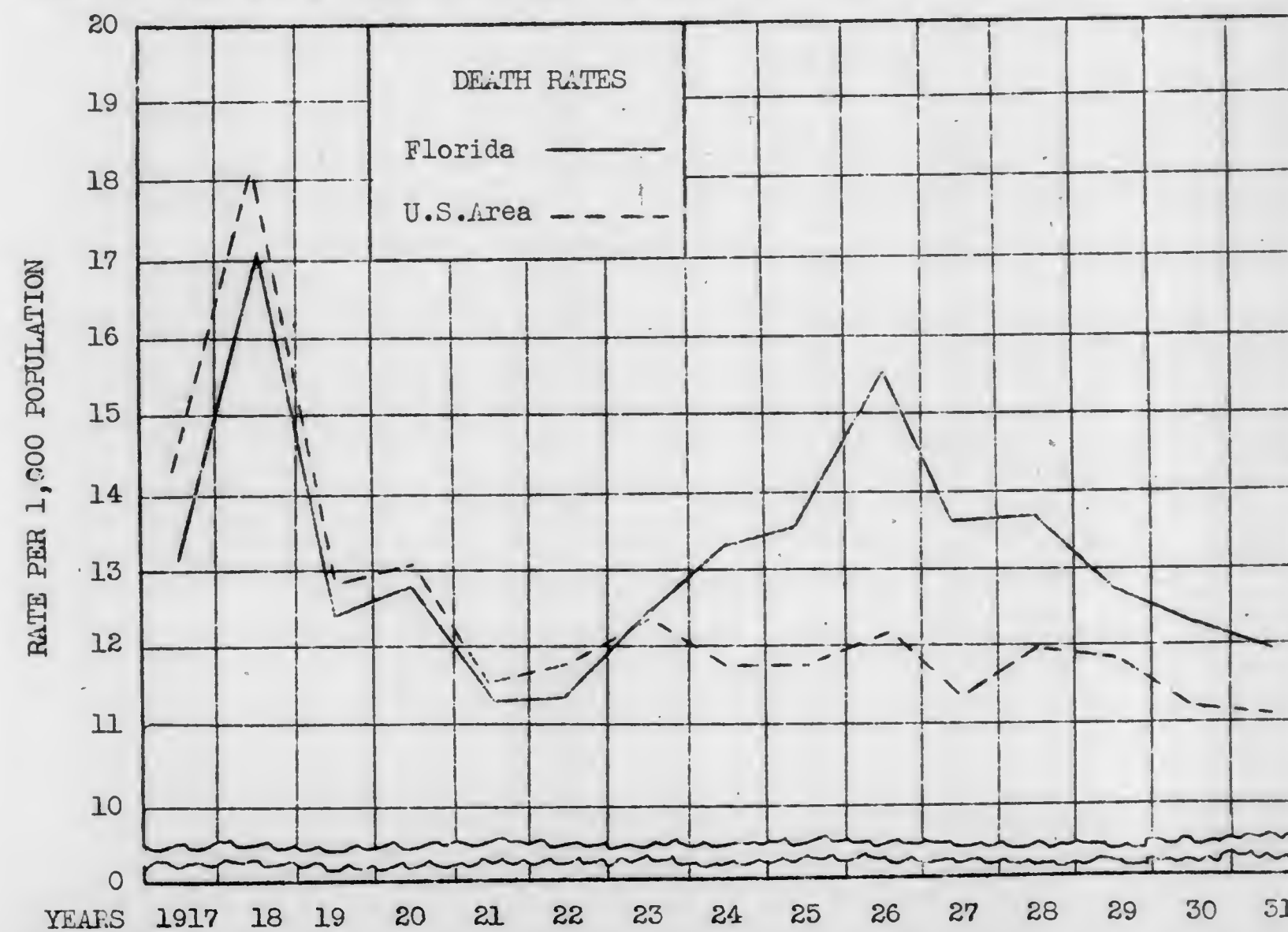
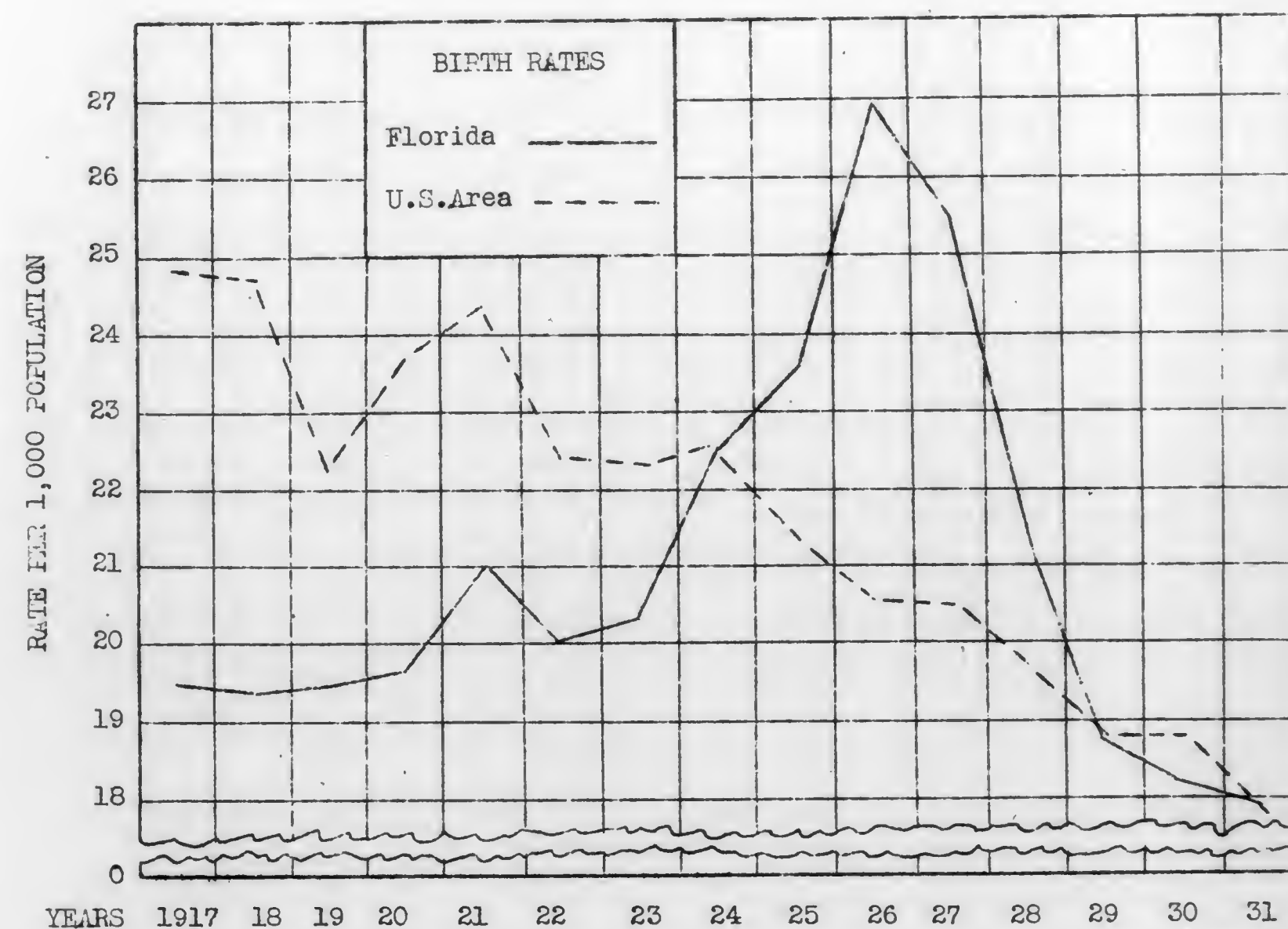








CENTRAL BUREAU OF VITAL STATISTICS



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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 1. ESTIMATED POPULATION BY COLOR, BY COUNTIES, FLORIDA, 1931

COUNTIES	TOTAL	WHITE	COLORED
STATE	1,506,000	1,064,000	442,000
Alachua	35,100	19,500	15,600
Baker	6,400	4,600	1,800
Bay	12,200	9,100	3,100
Bradford	9,700	6,900	2,800
Brevard	13,900	9,400	4,500
Broward	21,900	14,600	7,300
Calhoun	7,300	6,000	1,300
Charlotte	4,200	3,400	800
Citrus	5,600	3,800	1,800
Clay	7,000	5,300	1,700
Collier	3,100	2,200	900
Columbia	14,700	9,000	5,700
Dade	155,200	123,000	32,200
DeSoto	7,800	6,300	1,500
Dixie	6,900	3,600	3,300
Duval	160,600	106,500	54,100
Escambia	54,100	40,300	13,800
Flagler	2,500	1,600	900
Franklin	6,400	3,900	2,500
Gadsden	30,700	13,400	17,300
Gilchrist	4,200	3,500	700
Glades	2,800	1,900	900
Gulf	3,300	2,200	1,100
Hamilton	9,454	5,675	3,779
Hardee	10,400	9,600	800
Hendry	3,800	2,300	1,500
Hernando	5,000	3,500	1,500
Highlands	9,900	7,000	2,900
Hillsboro	161,500	131,000	30,500
Holmes	12,900	12,600	300
Indian River	7,100	5,100	2,000
Jackson	32,100	19,600	12,500
Jefferson	13,408	4,288	9,120
Lafayette	4,400	3,700	700
Lake	24,400	17,700	6,700
Lee	15,900	12,100	3,800
Leon	24,100	10,100	14,000
Levy	12,800	7,900	4,900
Liberty	4,067	2,646	1,421
Madison	15,614	7,411	8,203

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 1. CONTINUED.

COUNTIES	TOTAL	WHITE	COLORED
Manatee	23,400	16,300	7,100
Marion	30,300	15,600	14,700
Martin	5,500	3,300	2,200
Monroe	13,624	11,129	2,495
Nassau	9,375	5,487	3,888
Okaloosa	10,000	9,000	1,000
Oklawaha	4,400	3,000	1,400
Orange	55,400	40,300	15,100
Osceola	11,100	7,800	3,300
Palm Beach	56,100	37,800	18,300
Pasco	10,800	9,100	1,700
Pinellas	66,300	54,500	11,800
Polk	76,400	59,300	17,100
Putnam	18,500	10,800	7,700
St. Johns	19,400	12,400	7,000
St. Lucie	7,400	5,400	2,000
Santa Rosa	14,100	12,000	2,100
Sarasota	15,500	10,500	5,000
Seminole	19,700	10,800	8,900
Sumter	11,000	7,600	3,400
Suwannee	15,731	10,395	5,336
Taylor	15,400	8,300	7,100
Union	7,700	4,700	3,000
Volusia	45,100	32,000	13,100
Wakulla	5,500	3,300	2,200
Walton	14,900	12,100	2,800
Washington	12,200	9,700	2,500

Table No. 2. ESTIMATED POPULATION BY COLOR, BY CITIES, FLORIDA, 1931

Cities 100,000 and over Population

CITIES	TOTAL	WHITE	COLORED
Jacksonville	131,900	85,800	46,100
Miami	112,500	87,200	25,300
Tampa	105,000	82,800	22,200

Cities 10,000 to 100,000 Population

CITIES	TOTAL	WHITE	COLORED
Daytona Beach	17,800	12,000	5,800
Gainesville	10,900	6,700	4,200
Key West	12,831	10,548	2,283
Lakeland	19,800	15,600	4,200
Orlando	29,200	21,100	8,100

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 2. CONTINUED. Cities 10,000 to 100,000 Population (Continued)

CITIES	TOTAL	WHITE	COLORED
Pensacola	31,600	22,100	9,500
St. Augustine	12,800	9,300	3,500
St. Petersburg	41,900	34,200	7,700
Sanford	10,700	5,500	5,200
Tallahassee	11,200	6,600	4,600
West Palm Beach	28,700	19,000	9,700

Cities 5,000 to 10,000 Population

CITIES	TOTAL	WHITE	COLORED
Bartow	5,400	3,600	1,800
Bradenton	6,200	4,600	1,600
Clearwater	8,200	6,000	2,200
Coral Gables	6,800	6,300	500
DeLand	5,500	3,900	1,600
Ft. Lauderdale	9,500	7,300	2,200
Ft. Myers	9,700	7,100	2,600
Ft. Pierce	5,100	3,800	1,300
Lake Worth	6,500	6,400	100
Miami Beach	7,200	6,900	300
Ocala	7,600	4,500	3,100
Palatka	6,600	3,600	3,000
Panama City	5,500	4,500	1,000
Plant City	7,200	5,000	2,200
River Junction	6,600	4,500	2,100
Sarasota	9,200	6,800	2,400
South Jacksonville	5,900	5,300	600
Winter Haven	7,800	6,100	1,700

Cities 2,500 to 5,000 Population

CITIES	TOTAL	WHITE	COLORED
Apalachicola	3,100	1,800	1,300
Arcadia	4,100	2,900	1,200
Avon Park	3,600	2,600	1,000
DeFuniak Springs	2,700	2,100	600
Eustis	3,000	2,100	900
Fernandina	3,000	1,500	1,500
Haines City	3,300	2,400	900
Hialeah	2,600	2,400	200
Hollywood	2,900	2,600	300
Kissimmee	3,200	2,400	800

Table No. 2. CONTINUED. Cities 2,500 to 5,000 Population (Continued)

CITIES	TOTAL	WHITE	COLORED
Lake City	4,500	3,200	1,300
Lake Wales	3,700	2,700	1,000
Lecsborg	4,400	2,900	1,500
Live Oak	2,700	1,700	1,000
Manatee	3,500	2,200	1,300
Marianna	3,500	2,400	1,100
McIntosh	2,900	1,900	1,000
New Smyrna	4,400	3,100	1,300
Palmetto	3,200	2,000	1,200
Perry	2,800	1,700	1,100
Pompano	2,800	1,200	1,600
Quincy	3,900	2,100	1,800
Sebring	3,100	2,400	700
Tarpon Springs	3,600	2,900	700
Wauchula	2,600	2,600	15
Winter Park	4,000	2,700	1,300

Table No. 3. BIRTHS (Exclusive of Stillbirths) AND BIRTH RATES PER 1,000 POPULATION, BY COLOR, BY COUNTIES, FLORIDA, 1931

COUNTIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
STATE	27,033	18.0	18,658	17.5	8,375	18.9
Alachua	623	17.7	345	17.7	278	17.8
Baker	166	25.9	123	26.7	43	23.9
Bay	329	27.0	259	28.5	70	22.6
Bradford	188	19.4	148	21.4	40	14.3
Brevard	193	13.9	117	12.4	76	16.9
Broward	381	17.4	196	13.4	185	25.3
Calhoun	167	22.9	139	23.2	28	21.5
Charlotte	49	11.7	38	11.2	11	13.8
Citrus	96	17.1	54	14.2	42	23.3
Clay	102	14.6	75	14.2	27	15.9
Collier	26	8.4	22	10.0	4	4.4
Columbia	322	21.9	188	20.9	134	23.5
Dade	2,199	14.2	1,626	13.2	573	17.8
DeSoto	206	26.4	185	29.4	21	14.0
Dixie	133	19.3	100	27.8	33	10.0
Duval	2,851	17.8	1,931	18.1	920	17.0
Escambia	1,079	19.9	881	21.9	198	14.3
Flagler	31	12.4	17	10.6	14	15.6
Franklin	111	17.3	67	17.2	44	17.6
Gadsden	616	20.1	225	16.8	391	22.6

Table No. 3. CONTINUED.

COUNTIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Gilchrist	103	24.5	91	26.0	12	17.1
Glades	29	10.4	17	8.9	12	13.3
Gulf	53	16.1	31	14.1	22	20.0
Hamilton	217	23.0	129	22.7	88	23.3
Hardee	194	18.7	174	18.1	20	25.0
Hendry	58	15.3	50	21.7	8	5.3
Hernando	82	16.4	49	14.0	33	22.0
Highlands	218	22.0	175	25.0	43	14.8
Hillsboro	2,632	16.3	2,187	16.7	445	14.6
Holmes	296	22.9	284	22.5	12	40.0
Indian River	170	23.9	111	21.8	59	29.5
Jackson	835	26.0	477	24.3	358	28.6
Jefferson	312	23.3	57	13.3	255	28.0
Lafayette	106	24.1	102	27.6	4	5.7
Lake	456	18.7	314	17.7	142	21.2
Lee	246	15.5	191	15.8	55	14.5
Leon	503	20.9	176	17.4	327	23.4
Levy	222	17.3	128	16.2	94	19.2
Liberty	99	24.3	60	22.7	39	27.4
Madison	427	27.3	170	22.9	257	31.3
Manatee	350	15.0	233	14.3	117	16.5
Marion	491	16.2	226	14.5	265	18.0
Martin	81	14.7	50	15.2	31	14.1
Monroe	230	16.9	175	15.7	55	22.0
Nassau	202	21.5	106	19.3	96	24.7
Okaloosa	240	24.0	219	24.3	21	21.0
Okeechobee	60	13.6	58	19.3	2	1.4
Orange	857	16.0	651	16.2	206	15.7
Osceola	137	12.3	96	12.3	41	12.4
Palm Beach	806	14.4	513	13.6	293	16.0
Pasco	190	17.6	148	16.3	42	24.7
Pinellas	897	13.5	717	13.2	180	15.3
Polk	1,408	18.4	1,092	18.3	316	18.8
Putnam	325	17.6	172	16.2	153	19.4
St. Johns	348	17.9	215	17.3	133	19.0
St. Lucie	142	19.2	103	19.1	39	19.5
Santa Rosa	314	22.3	270	22.5	44	21.0
Sarasota	188	13.9	141	13.4	47	15.7
Seminole	363	18.4	163	15.1	200	22.5
Sumter	188	17.1	115	15.1	73	21.5

Table No. 3. CONTINUED.

COUNTIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Suwannee	408	25.9	244	23.5	164	30.7
Taylor	181	13.5	130	15.7	51	10.0
Union	171	22.2	140	29.8	31	10.3
Volusia	640	14.2	463	14.5	177	13.5
Wakulla	107	19.5	62	18.8	45	20.5
Walton	272	18.3	223	18.4	49	17.5
Washington	311	25.5	224	23.1	87	34.8

Table No. 4. BIRTHS (Exclusive of Stillbirths) AND BIRTH RATES PER 1,000 POPULATION, BY COLOR, BY CITIES, FLORIDA, 1931

Cities 100,000 and over Population

CITIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Jacksonville	2,481	18.8	1,686	20.1	795	16.5
Miami	1,821	16.2	1,318	15.1	503	19.9
Tampa	1,778	16.9	1,447	17.5	331	14.9

Cities 10,000 to 100,000 Population

CITIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Daytona Beach	276	15.5	200	16.7	76	13.1
Gainesville	228	20.9	154	23.0	74	17.6
Key West	230	17.9	175	16.6	55	24.1
Lakeland	301	15.2	236	15.1	65	15.5
Orlando	561	19.2	447	21.2	114	14.1
Pensacola	657	20.8	525	23.8	132	13.9
St. Augustine	244	19.1	183	19.7	61	17.4
St. Petersburg	553	13.2	430	12.6	123	16.0
Sanford	211	19.7	110	20.0	101	19.4
Tallahassee	256	22.9	137	20.8	119	25.9
West Palm Beach	510	17.8	334	17.6	176	18.1

Cities 5,000 to 10,000 Population

CITIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Bartow	157	29.1	113	31.4	44	24.4
Bradenton	125	20.2	88	19.1	37	23.1
Clearwater	144	17.6	113	18.8	31	14.1
Coral Gables	63	9.3	63	10.0	0	-
DeLand	121	22.0	90	23.1	31	19.4

Table No. 4. CONTINUED. Cities 5,000 to 10,000 Population (Continued)

CITIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Ft. Lauderdale	158	16.6	107	14.7	51	23.2
Ft. Myers	182	18.8	129	18.2	53	20.4
Ft. Pierce	123	24.1	92	24.2	31	23.8
Lake Worth	55	8.5	50	7.8	5	50.0
Miami Beach	53	7.4	53	7.7	0	-
Ocala	171	22.5	119	26.4	52	16.8
Palatka	145	22.0	92	25.6	53	17.7
Panama City	145	26.4	123	27.3	22	22.0
Plant City	228	31.7	187	37.4	41	18.6
River Junction	66	10.0	55	12.2	11	5.2
Sarasota	166	18.0	122	17.9	44	18.3
South Jacksonville	103	17.5	62	11.7	41	68.3
Winter Haven	171	21.9	131	21.5	40	23.5

Cities 2,500 to 5,000 Population

CITIES	Total Births	Rate per 1,000 Pop.	White Births	Rate per 1,000 Pop.	Col. Births	Rate per 1,000 Pop.
Apalachicola	62	20.0	38	21.1	24	18.5
Arcadia	143	34.9	126	43.4	17	14.2
Avon Park	82	22.8	64	24.6	18	18.0
DeFuniak Springs	68	25.2	49	23.3	19	31.7
Eustis	75	25.0	47	22.4	28	31.1
Fernandina	53	17.7	25	16.7	28	18.7
Haines City	65	19.7	52	21.7	13	14.4
Hialeah	21	8.1	20	8.3	1	5.0
Hollywood	50	17.2	38	14.6	12	40.0
Kissimmee	69	21.6	49	20.4	20	25.0
Lake City	107	23.8	74	23.1	33	25.4
Lake Wales	87	23.5	57	21.1	30	30.0
Leesburg	91	20.7	59	20.3	32	21.3
Live Oak	56	20.7	31	18.2	25	25.0
Manatee	74	21.1	50	22.7	24	18.5
Marianna	68	19.4	37	15.4	31	28.2
Melbourne	47	16.2	24	12.6	23	23.0
New Smyrna	68	15.5	41	13.2	27	20.8
Palmetto	47	14.7	19	9.5	28	23.3
Perry	49	17.5	32	18.8	17	15.5
Pompano	74	26.4	14	11.7	60	37.5
Quincy	87	22.3	44	21.0	43	23.9
Sebring	90	29.0	74	30.8	16	22.9
Tarpon Springs	81	22.5	72	24.8	9	12.9
Wauchula	60	23.1	57	21.9	3	200.0
Winter Park	25	6.3	11	4.1	14	10.8

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 5. DEATHS (Exclusive of Stillbirths) AND DEATH RATES PER 1,000
POPULATION, BY COLOR, BY COUNTIES, FLORIDA, 1931

COUNTIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
STATE	18,101	12.0	11,056	10.4	7,045	15.9
Alachua	486	13.8	219	11.2	267	17.1
Baker	60	9.4	35	7.6	25	13.9
Bay	173	14.2	99	10.9	74	23.9
Bradford	88	9.1	50	7.2	38	13.6
Brevard	155	11.2	88	9.4	67	14.9
Broward	234	10.7	130	8.9	104	14.2
Calhoun	70	9.6	44	7.3	26	20.0
Charlotte	27	6.4	18	5.3	9	11.3
Citrus	68	12.1	34	8.9	34	18.9
Clay	73	10.4	44	8.3	29	17.1
Collier	22	7.1	15	6.8	7	7.8
Columbia	290	19.7	179	19.9	111	19.5
Dade	1,596	10.3	1,163	9.5	433	13.4
DeSoto	154	19.7	113	17.9	41	27.3
Dixie	64	9.3	38	10.6	26	7.9
Duval	2,163	13.5	1,098	10.3	1,065	19.7
Escambia	742	13.7	476	11.8	266	19.3
Flagler	27	10.8	10	6.3	17	18.9
Franklin	52	8.1	16	4.1	36	14.4
Gadsden*	771	25.1	376	28.1	395	22.8
Gilchrist	40	9.5	31	8.9	9	12.9
Glades	28	10.0	15	7.9	13	14.4
Gulf	16	4.8	5	2.3	11	10.0
Hamilton	110	11.6	54	9.5	56	14.8
Hardee	96	9.2	86	9.0	10	12.5
Hendry	25	6.6	12	5.2	13	8.7
Hernando	68	13.6	43	12.3	25	16.7
Highlands	127	12.8	75	10.7	52	17.9
Hillsboro	1,677	10.4	1,165	8.9	512	16.8
Holmes	87	6.7	82	6.5	5	16.7
Indian River	69	9.7	45	8.4	26	13.0
Jackson	302	9.4	169	8.6	133	10.6
Jefferson	205	15.3	51	11.9	154	16.9
Lafayette	27	6.1	22	5.9	5	7.1
Lake	289	11.8	178	10.1	111	16.6
Lee	169	10.6	107	8.8	62	16.3
Leon	265	11.0	80	7.9	185	13.2
Levy	123	9.6	65	8.2	58	11.8
Liberty	44	10.8	24	9.1	20	14.1
Madison	180	11.5	88	11.9	92	11.2

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 5. CONTINUED.

COUNTIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
Manatee	210	9.0	142	8.7	68	9.6
Marion	420	13.9	195	12.5	225	15.3
Martin	57	10.4	25	7.6	32	14.5
Monroe	207	15.2	159	14.3	48	19.2
Nassau	122	13.0	43	7.8	79	20.3
Okaloosa	87	8.7	73	8.1	14	14.0
Okeechobee	22	5.0	14	4.7	8	5.7
Orange	686	12.8	509	12.6	177	13.5
Osceola	151	13.6	110	14.1	41	12.4
Palm Beach	559	10.0	311	8.2	248	13.6
Pasco	144	13.3	109	12.0	35	20.6
Pinellas	898	13.5	734	13.5	164	13.9
Polk	780	10.2	550	9.2	230	13.7
Putnam	229	12.4	104	9.8	125	15.8
St. Johns	252	13.0	126	10.2	126	18.0
St. Lucie	86	11.6	63	11.7	23	11.5
Santa Rosa	128	9.1	93	7.8	35	16.7
Sarasota	126	9.3	89	8.5	37	12.3
Seminole	266	13.5	111	10.3	155	17.4
Sumter	117	10.6	72	9.5	45	13.2
Suwannee	208	13.2	104	10.0	104	19.5
Taylor	133	9.9	64	7.7	69	13.5
Union	72	9.4	31	6.6	41	13.7
Volusia	611	13.5	403	12.6	208	15.9
Wakulla	53	9.6	27	8.2	26	11.8
Walton	109	7.3	84	6.9	25	8.9
Washington	106	8.7	71	7.3	35	14.0

Table No. 6. DEATHS (Exclusive of Stillbirths) AND DEATH RATES PER 1,000
POPULATION, BY COLOR, BY CITIES, FLORIDA, 1931

Cities 100,000 and over Population

CITIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
Jacksonville	1,945	14.7	964	11.5	981	20.4
Miami	1,285	11.4	913	10.5	372	14.7
Tampa	1,180	11.2	838	10.1	342	15.4

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Table No. 6. CONTINUED. Cities 10,000 to 100,000 Population (Continued)

CITIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
Daytona Beach	278	15.6	185	15.4	93	16.0
Gainesville	230	21.1	115	17.2	115	27.4
Key West	204	15.9	156	14.8	48	21.0
Lakeland	229	11.6	174	11.2	55	13.1
Orlando	507	17.4	393	18.6	114	14.1
Pensacola	503	15.9	312	14.1	191	20.1
St. Augustine	203	15.9	114	12.3	89	25.4
St. Petersburg	637	15.2	518	15.1	119	15.5
Sanford	188	17.6	75	13.6	113	21.7
Tallahassee	140	12.5	60	9.1	80	17.4
West Palm Beach	378	13.2	195	10.3	183	18.9

Cities 5,000 to 10,000 Population

CITIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
Bartow	149	27.6	94	26.1	59	32.8
Bradenton	59	9.5	46	10.0	13	8.1
Clearwater	96	11.7	76	12.7	20	9.1
Coral Gables	44	6.5	43	6.8	1	2.0
DeLand	107	19.5	76	19.5	31	19.4
Ft. Lauderdale	114	12.0	83	11.4	31	14.1
Ft. Myers	130	13.4	80	11.3	50	19.2
Ft. Pierce	76	14.9	55	14.5	21	16.2
Lake Worth	47	7.2	46	7.2	1	10.0
Miami Beach	94	13.1	93	13.5	1	3.3
Ocala	190	25.0	110	24.4	80	25.8
Palatka	124	18.8	58	16.1	66	22.0
Panama City	70	12.7	41	9.1	29	29.0
Plant City	81	11.3	48	9.6	33	15.0
River Junction*	499	75.6	285	63.3	214	101.9
Sarasota	103	11.2	74	10.9	29	12.1
South Jacksonville	61	10.3	41	7.7	20	33.3
Winter Haven	91	11.7	68	11.1	23	13.5

Cities 2,500 to 5,000 Population

CITIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
Apalachicola	31	10.0	5	2.8	26	20.0
Arcadia	122	29.8	85	29.3	37	30.8
Avon Park	53	14.7	29	11.2	24	24.0
DeFuniak Springs	30	11.1	21	10.0	9	15.0
Eustis	59	19.7	37	17.6	22	24.4

*State Hospital Inmates Included.

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 6. CONTINUED. Cities 2,500 to 5,000 Population (Continued)

CITIES	Total Deaths	Rate per 1,000 Pop.	White Deaths	Rate per 1,000 Pop.	Col. Deaths	Rate per 1,000 Pop.
Formandina	42	14.0	12	8.0	30	20.0
Haines City	40	12.1	22	9.2	18	20.0
Hialeah	12	4.6	10	4.2	2	10.0
Hollywood	25	8.6	22	8.5	3	10.0
Kissimmee	47	14.7	36	15.0	11	13.8
Lake City	183	40.7	125	39.1	58	44.6
Lake Wales	56	15.1	41	15.2	15	15.0
Leesburg	62	14.1	26	9.0	36	24.0
Live Oak	51	18.9	15	8.8	36	36.0
Manatee	54	15.4	35	15.9	19	14.6
Marianna	44	12.6	32	13.3	12	10.9
Melbourne	35	12.1	21	11.1	14	14.0
New Smyrna	59	13.4	29	9.4	30	23.1
Palmetto	42	13.1	17	8.5	25	20.8
Perry	40	14.3	12	7.1	28	25.5
Pompano	34	12.1	5	4.2	29	18.1
Quincy	64	16.4	36	17.1	28	15.6
Sebring	55	17.7	34	14.2	21	30.0
Tarpon Springs	48	13.3	37	12.8	11	15.7
Wauchula	48	18.5	47	18.1	1	66.7
Winter Park	36	9.0	21	7.8	15	11.5

Table No. 7. INFANT MORTALITY - DEATHS OF INFANTS UNDER ONE YEAR OF AGE AND RATES PER 1,000 LIVE BIRTHS, BY COLOR, BY COUNTIES, FLORIDA, 1931

COUNTIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col. Deaths Und 1 Yr	Per 1,000 Births
STATE	1,737	64	979	52	758	91
Alachua	46	74	27	78	19	68
Baker	9	54	4	33	5	116
Bay	34	103	16	62	18	257
Bradford	9	48	8	54	1	25
Brevard	12	62	4	34	8	105
Broward	28	73	8	41	20	108
Calhoun	12	72	9	65	3	107
Charlotte	3	61	3	79	0	-
Citrus	9	94	3	56	6	143
Clay	7	69	3	40	4	148
Collier	1	38	1	45	0	-
Columbia	24	75	14	74	10	75
Dade	128	58	70	43	58	101
DeSoto	29	141	24	130	5	238
Dixie	17	128	10	100	7	212

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Table No. 7. CONTINUED.

COUNTIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Duval	161	56	102	53	59	64
Escambia	68	63	46	52	22	111
Flagler	1	32	1	59	0	-
Franklin	5	45	2	30	3	68
Gadsden	61	99	26	116	35	90
Gilchrist	8	78	6	66	2	167
Glades	4	138	2	118	2	167
Gulf	1	19	0	-	1	45
Hamilton	12	55	4	31	8	91
Hardee	15	77	14	80	1	50
Hendry	0	-	0	-	0	-
Hernando	4	49	1	20	3	91
Highlands	7	32	7	40	0	-
Hillsboro	157	60	99	45	58	130
Holmes	19	64	17	60	2	167
Ind.River	5	29	2	18	3	51
Jackson	51	61	34	71	17	47
Jefferson	28	90	7	123	21	82
Lafayette	5	47	4	39	1	250
Lake	30	66	13	41	17	120
Lee	10	41	4	21	6	109
Leon	41	82	12	68	29	89
Levy	16	72	6	47	10	106
Liberty	9	91	6	100	3	77
Madison	29	68	13	76	16	62
Manatee	14	40	7	30	7	60
Marion	35	71	13	58	22	83
Martin	7	86	0	-	7	226
Monroe	18	78	11	63	7	127
Nassau	19	94	5	47	14	146
Okaloosa	9	38	7	32	2	95
Okeechobee	2	33	2	34	0	-
Orange	57	67	35	54	22	107
Osceola	10	73	6	63	4	98
Palm Beach	52	65	23	45	29	99
Pasco	12	63	10	68	2	48
Pinellas	47	52	33	46	14	78
Polk	73	52	52	48	21	66
Putnam	26	80	9	52	17	111
St. Johns	13	37	7	33	6	45
St. Lucie	11	77	5	49	6	154
Santa Rosa	22	70	17	63	5	114
Sarasota	8	43	4	28	4	85
Seminole	28	77	7	43	21	105
Sumter	10	53	5	43	5	68

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 7. CONTINUED.

COUNTIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Suwannee	36	88	13	53	23	140
Taylor	17	94	11	85	6	118
Union	4	23	4	29	0	-
Volusia	53	83	33	71	20	113
Wakulla	8	75	6	97	2	44
Walton	12	44	11	49	1	20
Washington	19	61	11	49	8	92

Table No. 8. INFANT MORTALITY - DEATHS OF INFANTS UNDER ONE YEAR OF AGE AND RATES PER 1,000 LIVE BIRTHS, BY COLOR, BY CITIES, FLORIDA, 1931

Cities 100,000 and over Population

CITIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Jacksonville	142	57	92	55	50	63
Miami	104	57	53	40	51	101
Tampa	118	66	73	50	45	136

Cities 10,000 to 100,000 Population

CITIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Daytona Beach	27	98	16	80	11	145
Gainesville	17	75	12	78	5	68
Key West	18	78	11	63	7	127
Lakeland	14	47	9	38	5	77
Orlando	37	66	25	56	12	105
Pensacola	45	68	28	53	17	129
St. Augustine	9	37	7	38	2	33
St. Petersburg	29	52	17	40	12	98
Sanford	19	90	4	36	15	149
Tallahassee	24	94	9	66	15	126
W. Palm Beach	28	55	10	30	18	102

Cities 5,000 to 10,000 Population

CITIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Bartow	10	64	9	80	1	23
Bradenton	4	32	1	11	3	81
Clearwater	7	49	6	53	1	32
Coral Gables	5	79	5	79	0	-
DeLand	7	58	6	67	1	32

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 8. CONTINUED. Cities 5,000 to 10,000 Population (Continued)

CITIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Ft.Lauderdale	7	44	3	28	4	78
Ft.Myers	8	44	2	16	6	113
Ft.Pierce	8	65	2	22	6	194
Lake Worth	5	91	4	80	1	200
Miami Beach	2	38	2	38	0	-
Ocala	12	70	6	50	6	115
Palatka	15	103	7	76	8	151
Panama City	12	83	6	49	6	273
Plant City	7	31	6	32	1	24
River Junction	11	167	10	182	1	91
Sarasota	8	48	4	33	4	91
South Jax.	5	49	4	65	1	24
Winter Haven	9	53	4	31	5	125

Cities 2,500 to 5,000 Population

CITIES	Deaths Und 1 Yr	Per 1,000 Births	White Deaths Und 1 Yr	Per 1,000 Births	Col.Deaths Und 1 Yr	Per 1,000 Births
Apalachicola	1	16	0	-	1	42
Arcadia	23	161	19	151	4	235
Avon Park	2	24	2	31	0	-
DeFuniak Spgs.	3	44	3	61	0	-
Eustis	6	80	1	21	5	179
Fernandina	4	75	2	80	2	71
Haines City	3	46	1	19	2	154
Hialeah	0	-	0	-	0	-
Hollywood	2	40	1	26	1	83
Kissimmee	1	14	0	-	1	50
Lake City	12	112	8	108	4	121
Lake Wales	3	34	2	35	1	33
Leesburg	11	121	5	85	6	188
Live Oak	4	71	0	-	4	160
Manatee	2	27	1	20	1	42
Marianna	6	88	3	81	3	97
Melbourne	3	64	0	-	3	130
New Smyrna	4	59	0	-	4	148
Palmetto	1	21	0	-	1	36
Perry	6	122	3	94	3	176
Pompano	10	135	1	71	9	150
Quincy	6	69	4	91	2	47
Sebring	5	56	5	68	0	-
Tarpon Springs	6	74	6	83	0	-
Wauchula	7	117	7	123	0	-
Winter Park	3	120	0	-	3	214

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 9. STILLBIRTHS AND ILLEGITIMATE BIRTHS, BY COLOR, BY COUNTIES, FLORIDA, 1931

COUNTIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
STATE	1,525	690	835	1,651	288	1,363
Alachua	65	14	51	70	4	66
Baker	8	4	4	7	6	1
Bay	16	10	6	13	1	12
Bradford	15	9	6	12	4	8
Brevard	7	2	5	8	2	6
Broward	16	7	9	15	3	12
Calhoun	12	5	7	6	4	2
Charlotte	2	2	0	3	1	2
Citrus	2	2	0	11	1	10
Clay	7	3	4	1	0	1
Collier	0	0	0	1	1	0
Columbia	21	10	11	25	4	21
Dade	108	59	49	101	18	83
DeSoto	10	5	5	6	2	4
Dixie	11	6	5	5	2	3
Duval	192	76	116	195	49	146
Escambia	71	43	28	59	24	35
Flagler	2	1	1	1	0	1
Franklin	10	5	5	14	1	13
Gadsden	47	8	39	86	3	83
Gilchrist	7	6	1	3	1	2
Glades	5	2	3	2	0	2
Gulf	1	1	0	2	0	2
Hamilton	6	1	5	18	2	16
Hardee	12	12	0	2	0	2
Hendry	4	1	3	6	1	5
Hernando	5	3	2	6	3	3
Highlands	5	2	3	9	1	8
Hillsboro	136	88	48	87	20	67
Holmes	18	16	2	7	4	3
Indian River	6	2	4	6	0	6
Jackson	41	19	22	82	7	75
Jefferson	30	3	27	43	5	40
Lafayette	4	3	1	1	1	0
Lake	20	8	12	19	3	16
Lee	14	7	7	14	3	11
Leon	35	1	34	75	0	75
Levy	22	2	20	17	4	13
Liberty	6	2	4	6	4	2
Madison	27	5	22	40	1	39

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 9. CONTINUED

COUNTIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
Manatee	19	5	14	22	1	21
Marion	38	13	25	55	0	55
Martin	3	1	2	2	1	1
Monroe	4	3	1	10	3	7
Nassau	14	5	9	11	0	11
Okaloosa	9	8	1	9	5	4
Okeechobee	1	1	0	1	0	1
Orange	56	30	26	48	13	35
Osceola	8	2	6	6	1	5
Palm Beach	32	14	18	57	2	55
Pasco	9	4	5	11	7	4
Pinellas	42	19	23	57	21	36
Polk	75	43	32	60	14	46
Putnam	22	7	15	22	3	19
St. Johns	17	3	14	16	2	14
St. Lucie	8	5	3	3	1	2
Santa Rosa	9	7	2	11	4	7
Sarasota	6	2	4	6	0	6
Seminole	23	7	16	36	0	36
Sumter	7	0	7	10	0	10
Suwannee	21	13	8	31	4	27
Taylor	2	0	2	11	3	8
Union	8	6	2	6	3	3
Volusia	37	18	19	26	4	22
Wakulla	4	2	2	9	1	8
Walton	11	8	3	14	5	9
Washington	14	9	5	17	2	15

Table No. 10. STILLBIRTHS AND ILLEGITIMATE BIRTHS, BY COLOR, BY CITIES, FLORIDA, 1931

Cities 100,000 and over Population

CITIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
Jacksonville	179	71	108	173	46	127
Miami	94	47	47	85	13	72
Tampa	99	60	39	68	9	59

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 10. CONTINUED. Cities 10,000 to 100,000 Population.

CITIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
Daytona Beach	18	9	9	14	2	12
Gainesville	22	9	13	26	2	24
Key West	4	3	1	10	3	7
Lakeland	15	11	4	11	2	9
Orlando	39	21	18	32	9	23
Pensacola	56	33	23	41	14	27
St. Augustine	9	2	7	10	2	8
St. Petersburg	27	9	18	42	20	22
Sanford	17	7	10	16	0	16
Tallahassee	15	1	14	20	0	20
West Palm Beach	20	6	14	38	1	37

Cities 5,000 to 10,000 Population

CITIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
Bartow	7	2	5	15	3	12
Bradenton	6	2	4	11	1	10
Clearwater	10	6	4	9	1	8
Coral Gables	2	2	0	1	1	0
DeLand	6	4	2	7	2	5
Ft. Lauderdale	7	4	3	5	1	4
Ft. Myers	11	5	6	12	1	11
Ft. Pierce	8	5	3	2	1	1
Lake Worth	5	5	0	1	1	0
Miami Beach	1	1	0	1	1	0
Ocala	10	7	3	7	0	7
Palatka	12	3	9	6	0	6
Panama City	8	6	2	5	1	4
Plant City	5	2	3	1	0	0
River Junction	3	3	0	5	2	3
Sarasota	6	2	4	6	0	6
South Jacksonville	1	0	1	6	1	5
Winter Haven	7	3	4	10	0	10

Cities 2,500 to 5,000 Population

CITIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
Apalachicola	6	4	2	3	0	3
Arcadia	8	4	4	5	1	4
Avon Park	2	0	2	4	1	3
DeFuniak Springs	3	3	0	7	2	5
Eustis	3	2	1	6	0	6

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Table No. 10. CONTINUED. Cities 2,500 to 5,000 Population (Continued)

CITIES	STILLBIRTHS			ILLEGITIMATE BIRTHS		
	Total	White	Colored	Total	White	Colored
Fernandina	6	1	5	5	0	5
Haines City	4	1	3	3	1	2
Hialeah	2	2	0	1	0	1
Hollywood	2	2	0	0	0	0
Kissimmee	2	1	1	3	0	3
Lake City	10	4	6	8	0	8
Lake Wales	6	4	2	4	0	4
Leesburg	8	3	5	4	0	4
Live Oak	4	3	1	3	0	3
Manatee	3	1	2	4	0	4
Marianna	5	1	4	11	0	11
Melbourne	2	1	1	2	0	2
New Smyrna	8	3	5	0	0	0
Palmetto	6	0	6	4	0	4
Perry	1	0	1	6	1	5
Pompano	2	0	2	6	0	6
Quincy	2	0	2	9	0	9
Sebring	2	1	1	4	0	4
Tarpon Springs	2	1	1	2	0	2
Wauchula	1	1	0	0	0	0
Winter Park	1	1	0	1	0	1

Table No. 11. MARRIAGES PERFORMED, BY COUNTIES, FLORIDA, 1931

COUNTIES	TOTAL MARRIAGES	COUNTIES	TOTAL MARRIAGES
STATE	17,336		
Alachua	376	Duval	1,449
Baker	250	Escambia	617
Bay	151	Flagler	108
Bradford	134	Franklin	45
Brevard	133	Gadsden	273
Broward	725	Gilchrist	63
Calhoun	77	Glades	64
Charlotte	77	Gulf	35
Citrus	103	Hamilton	186
Clay	160	Hardee	147
Collier	32	Hendry	27
Columbia	185	Hernando	110
Dade	1,163	Highlands	125
DeSoto	115	Hillsboro	1,565
Dixie	*98	Holmes	145

*Figures from County Judge - Original Licenses not received.

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 11. CONTINUED.

COUNTIES	TOTAL MARRIAGES	COUNTIES	TOTAL MARRIAGES
Indian River	80	Pasco	176
Jackson	330	Pinellas	638
Jefferson	183	Polk	766
Lafayette	*56	Putnam	213
Lake	235	St. Johns	353
Lee	129	St. Lucie	95
Leon	273	Santa Rosa	353
Levy	168	Sarasota	150
Liberty	15	Seminole	322
Madison	237	Sumter	131
Manatee	282	Suwannee	207
Marion	286	Taylor	*161
Martin	84	Union	75
Monroe	132	Volusia	366
Nassau	214	Wakulla	70
Okaloosa	195	Walton	141
Okeechobee	57	Washington	165
Orange	503		
Osceola	254		
Palm Beach	503		

*Figures from County Judge - Original Licenses not received.

Table No. 12. DIVORCES AND ANNULMENTS GRANTED, BY COUNTIES, FLORIDA, 1931

COUNTIES	DIVORCES	ANNULMENTS	COUNTIES	DIVORCES	ANNULMENTS
STATE	3,563	26			
Alachua	43	0	Duval	616	9
Baker	9	0	Escambia	154	2
Bay	11	0	Flagler	9	0
Bradford	19	0	Franklin	5	0
Brevard	34	0	Gadsden	16	0
Broward	26	0	Gilchrist	0	0
Calhoun	11	0	Glades	1	0
Charlotte	15	0	Gulf	1	0
Citrus	13	0	Hamilton	14	0
Clay	7	0	Hardee	31	0
Collier	3	0	Hendry	3	0
Columbia	26	0	Hernando	9	0
Dade	519	3	Highlands	13	1
DeSoto	17	0	Hillsboro	551	0
Dixie	19	0	Holmes	7	0

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Table No. 12. CONTINUED.

COUNTIES	DIVORCES	ANNULMENTS	COUNTIES	DIVORCES	ANNULMENTS
Indian River	16	0	Pasco	25	0
Jackson	28	1	Pinellas	178	0
Jefferson	13	0	Polk	196	2
Lafayette	6	0	Putnam	30	1
Lake	41	0	St. Johns	36	0
Lee	44	0	St. Lucie	15	0
Leon	42	1	Santa Rosa	8	0
Levy	3	0	Sarasota	49	0
Liberty	5	0	Seminole	56	0
Madison	13	0	Sumter	20	0
Manatee	13	0	Suwannee	31	1
Marion	46	0	Taylor	23	0
Martin	11	0	Union	2	0
Monroe	38	2	Volusia	108	1
Nassau	12	0	Wakulla	5	0
Okaloosa	6	0	Walton	9	0
Okeechobee	5	0	Washington	8	0
Orange	103	1			
Osceola	20	0			
Palm Beach	97	1			

Table No. 13. DEATHS FROM TYPHOID FEVER, BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	142	121	83	72	87	505
Alachua	4	2	2	5	1	14
Baker	0	1	0	0	0	1
Bay	1	2	0	3	1	7
Bradford	1	2	2	2	2	9
Brevard	1	0	0	2	0	3
Broward	1	1	3	2	0	7
Calhoun	1	1	0	0	1	3
Charlotte	3	0	0	0	0	3
Citrus	0	1	0	0	0	1
Clay	0	0	0	0	0	0
Collier	1	0	0	0	1	2
Columbia	1	2	0	1	1	5
Dade	8	8	8	3	3	30
DeSoto	1	2	0	0	0	3
Dixie	0	0	0	0	0	0

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Table No. 13. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Duval	11	5	1	0	4	21
Escambia	17	8	6	6	14	51
Flagler	0	0	0	2	1	3
Franklin	0	0	0	1	0	1
Gadsden*	10	4	2	0	9	25
Gilchrist	0	1	0	0	0	1
Glades	0	0	2	0	0	2
Gulf	1	0	0	0	0	1
Hamilton	4	1	1	0	0	6
Hardee	0	1	0	0	0	1
Hendry	1	1	0	0	0	2
Hernando	1	0	0	0	0	1
Highlands	1	2	1	0	0	4
Hillsboro	10	17	3	3	7	40
Holmes	0	2	1	1	1	5
Indian River	2	0	1	1	1	5
Jackson	2	6	0	1	0	9
Jefferson	2	0	6	2	0	10
Lafayette	0	0	0	0	0	0
Lake	0	0	1	0	1	2
Lee	3	4	0	2	0	9
Leon	0	3	4	1	5	13
Levy	2	6	2	1	1	12
Liberty	1	0	0	0	0	1
Madison	2	1	1	2	1	7
Manatee	3	1	2	1	2	9
Marion	5	2	3	3	0	13
Martin	0	1	0	0	0	1
Monroe	1	2	2	1	0	6
Nassau	0	1	0	0	0	1
Okaloosa	0	0	4	0	1	5
Okeechobee	0	1	0	0	0	1
Orange	1	3	3	2	1	10
Osceola	1	3	0	1	1	6
Palm Beach	3	3	2	1	2	11
Pasco	3	1	0	1	0	5
Pinellas	5	0	4	4	4	17
Polk	9	2	4	3	7	25
Putnam	2	0	0	3	1	6
St. Johns	4	4	1	2	1	12
St. Lucie	0	0	0	0	0	0
Santa Rosa	0	0	1	0	0	1
Sarasota	0	0	2	0	1	3
Seminole	5	2	1	2	0	10
Sumter	1	0	0	0	0	1

*State Hospital inmates Included.

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 13. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Suwannee	3	2	0	0	1	6
Taylor	1	1	0	0	1	3
Union	0	0	2	1	0	3
Volusia	1	4	2	3	2	12
Wakulla	0	2	1	1	3	7
Walton	0	2	0	0	0	2
Washington	1	0	2	2	4	9

Table No. 14. DEATHS FROM MALARIA, BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	208	388	470	532	205	1,603
Alachua	4	7	17	12	6	46
Baker	0	1	2	1	1	5
Bay	1	4	3	4	4	16
Bradford	0	1	1	4	0	6
Brevard	2	1	0	0	1	4
Broward	2	1	2	0	3	8
Calhoun	10	5	4	7	5	31
Charlotte	2	0	0	1	1	4
Citrus	1	9	5	11	6	32
Clay	1	5	5	0	1	12
Collier	0	0	1	0	1	2
Columbia	3	6	10	10	4	33
Dade	2	2	3	2	1	10
DeSoto	1	0	2	0	0	3
Dixie	4	15	19	20	11	69
Duval	5	13	9	8	4	39
Escambia	6	6	8	10	4	34
Flagler	1	0	1	1	1	4
Franklin	0	1	4	4	1	10
Gadsden*	13	22	45	27	13	120
Gilchrist	2	9	4	5	3	23
Glades	0	1	0	0	0	1
Gulf	0	1	1	2	1	5
Hamilton	2	5	7	5	4	23
Hardee	1	2	0	1	1	5
Hendry	0	0	0	0	1	1
Hernando	1	2	3	1	0	7
Highlands	0	0	1	0	1	2
Hillsboro	8	6	11	5	1	31
Holmes	5	6	10	7	2	30

*State Hospital Inmates Included.

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Table No. 14. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Indian River	1	1	0	0	0	2
Jackson	20	36	34	22	13	125
Jefferson	6	21	24	18	5	74
Lafayette	0	5	1	4	1	11
Lake	3	8	1	2	3	17
Lee	1	1	0	0	3	5
Leon	3	4	13	6	3	29
Levy	4	23	20	23	9	79
Liberty	0	3	4	1	1	9
Madison	15	33	23	5	5	81
Manatee	6	0	2	2	0	10
Marion	17	13	23	18	11	82
Martin	0	1	0	1	1	3
Monroe	0	0	0	0	0	0
Nassau	1	0	1	3	0	5
Okaloosa	0	0	2	2	0	4
Okeechobee	2	1	3	2	0	8
Orange	2	3	4	6	6	21
Osceola	0	0	3	1	0	4
Palm Beach	1	3	0	0	2	6
Pasco	3	3	4	0	6	16
Pinellas	3	5	4	3	8	23
Polk	5	4	6	9	4	28
Putnam	1	2	4	0	1	8
St. Johns	0	2	2	2	1	7
St. Lucie	0	1	2	0	0	3
Santa Rosa	0	2	4	2	1	9
Sarasota	4	1	1	0	0	6
Seminole	8	4	5	6	4	27
Sumter	4	9	11	7	3	34
Suwannee	4	24	23	10	4	65
Taylor	5	20	23	3	4	55
Union	0	4	7	0	2	13
Volusia	3	3	8	3	5	22
Wakulla	2	4	13	10	7	36
Walton	2	5	5	6	3	21
Washington	5	8	12	7	7	39

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CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 15. DEATHS FROM MEASLES, BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	21	20	13	61	36	151
Alachua	2	3	0	2	0	7
Baker	0	0	0	0	0	0
Bay	0	0	0	0	3	3
Bradford	0	0	0	0	1	1
Brevard	1	0	0	0	1	2
Broward	0	1	0	0	0	1
Calhoun	0	0	2	0	0	2
Charlotte	0	0	0	0	0	0
Citrus	1	0	0	1	0	2
Clay	0	0	0	0	0	0
Collier	0	0	0	0	0	0
Columbia	0	0	0	2	3	5
Dade	1	0	1	0	0	2
DeSoto	0	0	0	0	2	2
Dixie	0	0	0	1	0	1
Duval	1	4	0	13	0	18
Escambia	2	0	0	9	0	11
Flagler	0	0	0	0	0	0
Franklin	0	0	0	0	0	0
Gadsden*	2	0	2	2	3	9
Gilchrist	0	0	0	0	0	0
Glades	0	0	0	0	0	0
Gulf	0	1	0	0	0	1
Hamilton	0	0	0	2	2	4
Hardee	0	0	0	0	0	0
Hendry	0	0	0	0	0	0
Hernando	0	0	0	0	0	0
Highlands	0	0	1	1	0	2
Hillsboro	2	2	0	0	5	9
Holmes	0	0	4	1	2	7
Indian River	0	0	0	0	0	0
Jackson	2	2	0	1	1	6
Jefferson	0	0	0	4	0	4
Lafayette	0	0	0	0	0	0
Lake	0	0	0	0	0	0
Lee	0	0	0	0	0	0
Leon	1	0	0	1	1	3
Levy	0	0	0	1	0	1
Liberty	0	0	0	0	0	0
Madison	0	0	0	3	1	4

*State Hospital Inmates Included.

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Table No. 15. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Manatee	0	1	0	0	1	2
Marion	0	0	1	1	0	2
Martin	0	0	0	0	0	0
Monroe	2	0	0	0	0	2
Nassau	0	0	0	1	0	1
Okaloosa	0	0	0	0	0	0
Okeechobee	0	0	0	0	0	0
Orange	1	2	0	0	2	5
Osceola	0	0	0	0	0	0
Palm Beach	0	0	0	2	0	2
Pasco	0	0	0	0	0	0
Pinellas	2	0	0	0	1	3
Polk	0	1	0	5	3	9
Putnam	0	1	0	1	0	2
St. Johns	0	0	1	1	0	2
St. Lucie	0	0	0	0	0	0
Santa Rosa	0	0	0	0	0	0
Sarasota	0	0	0	1	0	1
Seminole	0	0	0	0	0	0
Sumter	0	1	0	0	0	1
Suwannee	0	0	0	2	1	3
Taylor	0	0	0	1	2	3
Union	0	0	0	0	0	0
Volusia	1	0	0	0	0	1
Wakulla	0	0	0	1	0	1
Walton	0	0	1	1	1	3
Washington	0	1	0	0	0	1

Table No. 16. DEATHS FROM WHOOPING COUGH, BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	67	43	86	56	25	277
Alachua	1	0	1	1	1	4
Baker	1	0	0	0	0	1
Bay	2	0	0	1	6	9
Bradford	1	0	0	0	0	1
Brevard	1	1	1	0	0	3

Table No. 16. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Broward	2	0	0	1	0	3
Calhoun	1	0	0	1	1	3
Charlotte	0	0	0	0	0	0
Citrus	0	0	0	2	0	2
Clay	0	1	1	0	0	2
Collier	0	0	0	0	0	0
Columbia	1	1	2	0	0	4
Dade	6	3	4	2	2	17
DeSoto	0	0	1	0	0	1
Dixie	0	0	1	0	0	1
Duval	2	4	11	4	4	25
Escambia	5	5	1	6	0	17
Flagler	0	0	0	0	0	0
Franklin	1	0	2	0	0	3
Gadsden*	3	5	1	0	0	9
Gilchrist	0	0	0	0	0	0
Glades	0	0	0	0	0	0
Gulf	0	0	0	0	0	0
Hamilton	0	0	0	0	0	0
Hardee	0	2	2	0	0	4
Hendry	0	0	0	0	0	0
Hernando	0	0	1	3	0	4
Highlands	0	0	2	0	0	2
Hillsboro	6	2	9	3	3	23
Holmes	1	0	2	0	0	3
Indian River	0	0	0	0	0	0
Jackson	5	1	1	0	3	10
Jefferson	0	0	0	2	0	2
Lafayette	0	0	0	0	0	0
Lake	1	2	1	1	0	5
Lee	0	0	0	2	0	2
Leon	3	0	5	2	0	10
Levy	0	0	4	0	0	4
Liberty	0	0	0	0	0	0
Madison	1	0	2	0	0	3
Manatee	3	0	2	3	0	8
Marion	2	3	2	1	0	8
Martin	0	0	0	1	0	1
Monroe	0	0	0	0	0	0
Nassau	2	0	2	0	0	4
Okaloosa	0	1	0	0	0	1
Okcechobee	0	0	0	0	0	0
Orange	0	5	3	0	0	8
Osceola	1	0	0	0	0	1
Palm Beach	2	0	2	2	0	6

*State Hospital Inmates Included.

Table No. 16. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Pasco	1	0	0	0	0	1
Pinellas	0	0	1	3	0	4
Polk	0	2	8	2	1	13
Putnam	3	0	2	1	0	6
St. Johns	2	0	0	1	0	3
St. Lucie	0	1	0	1	0	2
Santa Rosa	1	0	0	2	0	3
Sarasota	0	0	1	0	1	2
Seminole	1	1	1	1	0	4
Sumter	0	0	1	1	0	2
Suwannee	1	1	4	1	1	8
Taylor	0	0	0	0	0	0
Union	0	0	0	0	0	0
Volusia	2	2	0	1	2	7
Wakulla	1	0	0	1	0	2
Walton	1	0	0	1	0	2
Washington	0	0	2	2	0	4

Table No. 17. DEATHS FROM DIPHTHERIA, BY COUNTIES, FLORIDA,
1927 - 1931

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	93	69	67	79	74	382
Alachua	0	1	0	1	2	4
Baker	0	0	2	0	0	2
Bay	1	0	0	1	2	4
Bradford	2	0	2	0	0	4
Brevard	1	2	0	0	0	3
Broward	1	1	0	2	0	4
Calhoun	0	0	0	2	0	2
Charlotte	0	0	0	0	0	0
Citrus	0	0	0	0	0	0
Clay	1	1	0	0	0	2
Collier	0	0	0	0	1	1
Columbia	0	0	1	2	2	5
Dade	7	8	10	4	1	30
DeSoto	0	2	1	2	2	7
Dixie	1	0	2	0	0	3

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Table No. 17. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Duval	12	8	6	9	3	38
Escambia	5	2	1	3	12	23
Flagler	0	0	0	0	0	0
Franklin	0	0	0	1	0	1
Gadsden*	0	4	2	3	2	11
Gilchrist	0	0	1	0	0	1
Glades	0	1	0	0	1	2
Gulf	1	0	0	0	0	1
Hamilton	0	0	0	0	0	0
Hardee	2	0	0	1	1	4
Hendry	0	0	1	0	0	1
Hernando	0	0	0	0	0	0
Highlands	1	1	1	0	0	3
Hillsboro	6	5	6	6	7	30
Holmes	1	2	1	0	0	4
Indian River	0	1	0	0	1	2
Jackson	3	2	1	1	4	11
Jefferson	0	0	0	0	0	0
Lafayette	0	1	0	1	0	2
Lake	1	0	0	1	0	2
Lec	2	0	1	2	0	5
Leon	1	0	0	0	2	3
Levy	2	1	1	1	0	5
Liberty	1	0	0	1	3	5
Madison	1	1	1	3	1	7
Manatee	3	3	1	2	1	10
Marion	0	0	2	3	1	6
Martin	1	0	0	0	0	1
Monroe	0	0	1	0	0	1
Nassau	1	0	0	0	1	2
Okaloosa	0	0	0	0	1	1
Oklawaha	0	0	0	0	0	0
Orange	2	1	5	0	1	9
Osceola	2	1	0	1	0	4
Palm Beach	2	4	1	1	1	9
Pasco	2	0	0	0	0	2
Pinellas	4	2	3	2	2	13
Polk	4	2	6	5	8	25
Putnam	3	2	0	3	0	8
St. Johns	2	0	0	1	1	4
St. Lucie	0	1	1	0	1	3
Santa Rosa	0	0	0	1	1	2
Sarasota	2	1	0	1	1	5
Seminole	1	1	2	2	0	6
Sumter	0	1	0	1	2	4

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 17. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Suwannee	2	3	2	1	0	8
Taylor	1	0	1	0	1	3
Union	0	0	0	1	1	2
Volusia	2	2	0	3	2	9
Wakulla	1	0	1	0	0	2
Walton	3	0	0	2	0	5
Washington	2	1	0	2	1	6

Table No. 18. DEATHS FROM INFLUENZA (All Forms), BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	323	666	903	342	607	2,841
Alachua	14	20	30	13	20	97
Baker	2	7	17	0	2	28
Bay	4	7	4	2	3	20
Bradford	2	4	15	2	5	28
Brevard	2	2	16	2	5	27
Broward	0	0	5	1	4	10
Calhoun	2	4	7	2	5	20
Charlotte	0	1	1	0	0	2
Citrus	0	3	3	1	1	8
Clay	0	2	5	0	2	9
Collier	0	2	1	0	0	3
Columbia	2	12	10	2	8	34
Dade	26	33	37	14	19	129
DeSoto	3	2	1	0	6	12
Dixie	0	1	9	0	6	16
Duval	43	73	119	28	73	336
Escambia	13	62	56	21	45	197
Flagler	0	0	1	0	0	1
Franklin	2	3	3	1	1	10
Gadsden*	10	31	47	29	25	142
Gilchrist	1	0	7	2	4	14
Glades	1	0	2	0	0	3
Gulf	1	2	0	0	0	3
Hamilton	1	5	6	8	5	25
Hardee	4	7	1	1	6	19

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 18. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Hendry	0	0	1	0	0	1
Hernando	5	1	1	0	3	10
Highlands	6	5	4	2	7	24
Hillsboro	11	62	57	33	55	218
Holmes	1	3	9	6	1	20
Indian River	1	1	2	0	5	9
Jackson	23	33	35	13	17	121
Jefferson	9	14	22	4	10	59
Lafayette	1	1	5	1	1	9
Lake	2	6	12	2	10	32
Lee	2	7	9	2	4	24
Leon	8	15	17	10	8	58
Levy	7	5	18	4	6	40
Liberty	1	2	2	1	1	7
Madison	0	12	7	8	11	38
Manatee	4	13	15	5	6	43
Marion	3	16	17	8	18	62
Martin	1	2	0	2	0	5
Monroe	2	14	3	3	6	28
Nassau	2	5	5	2	5	19
Okaloosa	2	8	10	1	0	21
Okeechobee	0	0	1	0	1	2
Orange	8	14	20	19	20	81
Osceola	5	5	12	3	2	27
Palm Beach	4	3	10	8	8	33
Pasco	2	7	6	1	2	18
Pinellas	12	9	32	14	21	88
Polk	18	28	29	14	24	113
Putnam	1	7	12	3	8	31
St. Johns	3	4	10	3	5	25
St. Lucie	3	3	1	0	5	12
Santa Rosa	2	7	9	2	3	23
Sarasota	0	2	3	1	3	9
Seminole	5	12	13	4	16	50
Sumter	1	6	3	0	8	18
Suwannee	13	13	9	12	24	71
Taylor	1	7	9	6	9	32
Union	6	6	9	5	1	27
Volusia	10	14	22	9	22	77
Wakulla	3	0	7	1	1	12
Walton	1	7	18	1	3	30
Washington	1	4	14	0	2	21

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 19. DEATHS FROM TUBERCULOSIS (All Forms), BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	1,097	1,102	1,014	1,015	1,067	5,295
Alachua	32	29	33	34	25	153
Baker	2	4	2	0	5	13
Bay	9	1	5	3	3	21
Bradford	5	2	3	3	1	14
Brevard	5	7	4	11	7	34
Broward	15	6	10	5	17	53
Calhoun	2	2	1	2	2	9
Charlotte	1	0	1	2	0	4
Citrus	2	5	0	2	7	16
Clay	4	6	3	4	3	20
Collier	0	1	1	0	0	2
Columbia	19	16	7	18	15	75
Dade	82	89	94	99	98	462
DeSoto	9	9	5	8	6	37
Dixie	0	3	4	1	0	8
Duval	186	187	173	189	196	931
Escambia	53	37	32	34	34	190
Flagler	0	1	2	2	4	9
Franklin	4	6	3	5	3	21
Gadsden*	44	44	43	53	63	247
Gilchrist	2	1	2	1	1	7
Glades	1	0	0	0	1	2
Gulf	1	1	0	0	0	2
Hamilton	9	4	6	5	2	26
Hardce	6	7	1	4	5	23
Hendry	1	1	2	1	2	7
Hernando	1	3	2	6	3	15
Highlands	8	12	8	7	7	42
Hillsboro	154	185	129	135	113	714
Holmes	2	1	3	1	1	8
Indian River	1	1	5	1	1	9
Jackson	9	11	16	13	8	57
Jefferson	11	6	4	8	6	35
Lafayette	1	1	0	1	1	4
Lake	16	17	19	18	18	88
Lee	10	9	4	10	14	47
Leon	11	5	9	9	3	37
Levy	5	6	6	8	9	34
Liberty	3	1	2	0	0	6
Madison	7	13	9	4	18	51

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 19. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Manatee	31	14	18	11	15	89
Marion	23	26	22	21	19	111
Martin	4	3	1	3	2	13
Monroe	26	19	22	20	20	107
Nassau	8	5	11	5	5	34
Okaloosa	0	2	1	2	1	6
Oklawaha	1	1	2	0	2	6
Orange	43	35	28	27	32	165
Osceola	5	6	16	9	7	43
Palm Beach	26	31	22	32	30	141
Pasco	9	12	11	10	5	47
Pinellas	38	36	31	31	35	171
Polk	33	55	42	29	51	210
Putnam	11	10	24	16	12	73
St. Johns	21	6	15	13	17	72
St. Lucie	3	3	3	2	6	17
Santa Rosa	2	7	7	3	4	23
Sarasota	8	9	9	4	9	39
Seminole	12	14	11	8	15	60
Sumter	2	9	6	3	7	27
Suwannee	5	5	6	7	9	32
Taylor	7	7	3	6	8	31
Union	9	17	10	9	17	62
Volusia	28	20	27	23	21	124
Wakulla	1	2	0	0	3	6
Walton	7	3	6	6	9	31
Washington	1	5	7	5	4	22

Table No. 20. DEATHS FROM PELLAGRA, BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	220	290	313	238	220	1,281
Alachua	6	13	12	9	9	49
Baker	1	1	1	0	0	3
Bay	4	1	4	2	4	15
Bradford	0	1	2	0	0	3
Brevard	0	2	1	0	1	4

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 20. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Broward	2	5	3	0	0	10
Calhoun	2	0	1	0	2	5
Charlotte	0	1	0	2	0	3
Citrus	2	1	2	1	2	8
Clay	1	1	1	1	0	4
Collier	0	0	0	1	1	2
Columbia	1	6	6	6	4	23
Dade	10	12	13	11	12	58
DeSoto	1	0	6	3	1	11
Dixie	0	0	0	0	2	2
Duval	29	49	55	28	43	204
Escambia	20	15	21	15	14	83
Flagler	0	0	0	0	1	1
Franklin	4	1	3	4	1	13
Gadsden*	30	34	34	33	25	156
Gilchrist	1	0	0	0	0	1
Glades	0	0	2	0	0	2
Gulf	1	2	0	0	1	4
Hamilton	0	2	1	0	1	4
Hardee	2	0	1	1	0	4
Hendry	0	0	0	0	0	0
Hernando	0	0	1	0	0	1
Highlands	4	1	4	0	0	9
Hillsboro	10	20	14	15	11	70
Holmes	0	2	0	3	1	6
Indian River	1	0	2	0	0	3
Jackson	1	1	6	11	3	22
Jefferson	2	2	3	2	2	11
Lafayette	0	0	1	0	1	2
Lake	3	2	3	2	1	11
Lee	1	1	0	1	1	4
Leon	4	4	6	5	4	23
Levy	0	3	4	0	2	9
Liberty	1	0	0	0	0	1
Madison	6	3	4	1	2	16
Manatee	7	7	4	6	3	27
Marion	7	8	5	8	5	33
Martin	0	1	0	0	1	2
Monroe	1	1	0	0	1	3
Nassau	0	5	3	5	3	16

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 20. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Okaloosa	4	0	2	1	4	11
Okeechobee	0	0	0	1	0	1
Orange	1	10	6	4	6	27
Osceola	1	4	4	2	3	14
Palm Beach	3	7	3	6	6	25
Pasco	0	1	3	5	0	9
Pinellas	3	2	1	2	4	12
Polk	6	9	17	5	5	42
Putnam	8	9	13	9	3	42
St. Johns	1	4	3	2	3	13
St. Lucie	0	1	0	0	0	1
Santa Rosa	2	2	3	1	4	12
Sarasota	0	5	0	0	1	6
Seminole	11	9	10	8	2	40
Sumter	1	3	1	0	1	6
Suwannee	3	5	2	3	2	15
Taylor	1	2	2	2	2	9
Union	1	0	0	0	1	2
Volusia	4	7	11	9	6	37
Wakulla	0	3	1	0	0	4
Walton	3	1	1	0	2	7
Washington	2	0	1	2	0	5

Table No. 21. DEATHS FROM PNEUMONIA (All Forms), BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	916	1,087	868	902	863	4,636
Alachua	25	22	21	29	31	128
Baker	5	8	7	6	2	28
Bay	8	10	4	12	14	48
Bradford	6	10	4	5	5	30
Brevard	7	10	3	5	6	31
Broward	4	11	6	7	7	35
Calhoun	2	5	6	6	4	23
Charlotte	1	0	3	1	0	5
Citrus	2	2	2	1	1	8
Clay	3	0	1	3	2	9

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 21. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Collier	0	0	0	0	2	2
Columbia	18	9	16	13	22	78
Dade	60	65	64	61	74	324
DeSoto	6	7	4	2	3	22
Dixie	4	10	8	4	3	29
Duval	148	196	145	122	117	728
Escambia	34	44	32	50	41	201
Flagler	0	0	2	1	0	3
Franklin	4	5	4	5	6	24
Gadsden*	49	62	47	45	17	220
Gilchrist	0	3	5	2	2	12
Glades	0	0	0	0	0	0
Gulf	1	1	0	0	1	3
Hamilton	9	5	7	12	10	43
Hardoe	2	6	5	7	8	28
Hendry	0	0	0	2	1	3
Hernando	0	2	0	3	3	8
Highlands	7	2	2	4	9	24
Hillsboro	85	92	68	73	79	397
Holmes	15	23	12	21	6	77
Indian River	1	2	2	2	2	9
Jackson	39	42	22	21	14	138
Jefferson	12	9	9	15	12	57
Lafayette	2	2	3	0	0	7
Lake	7	8	8	13	13	49
Lee	5	8	2	6	5	26
Leon	5	14	11	19	7	56
Levy	13	10	6	8	3	40
Liberty	4	2	1	2	0	9
Madison	11	17	3	14	13	58
Manatee	2	4	6	7	15	34
Marion	22	16	22	15	15	90
Martin	2	0	1	1	1	5
Monroe	8	11	8	6	5	38
Nassau	7	6	8	5	5	31
Okaloosa	7	5	5	3	3	23
Okeechobee	0	3	0	0	1	4
Orange	48	46	36	23	33	186
Osceola	4	7	6	6	9	32
Palm Beach	20	32	23	24	35	134

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 21. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Pasco	12	4	4	0	3	23
Pinellas	24	30	39	44	40	177
Polk	28	35	30	40	36	169
Putnam	19	16	14	11	5	65
St. Johns	11	20	12	19	11	73
St. Lucie	5	0	6	1	3	15
Santa Rosa	6	14	6	6	8	40
Sarasota	3	8	3	9	4	27
Seminole	10	8	10	8	7	43
Sumter	6	4	7	3	5	25
Suwannee	13	17	10	11	18	69
Taylor	7	9	14	13	8	51
Union	5	6	7	5	3	26
Volusia	18	20	19	25	25	107
Wakulla	9	6	1	0	4	20
Walton	10	28	11	7	7	63
Washington	6	8	15	8	9	46

Table No. 22. DEATHS FROM DIARRHEA, ENTERITIS AND DYSENTERY, BY COUNTIES, FLORIDA, 1927 - 1931

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	712	502	407	396	332	2,349
Alachua	27	23	10	16	10	86
Baker	4	4	3	0	0	11
Bay	10	6	6	8	12	42
Bradford	2	2	1	1	1	7
Brevard	6	8	2	4	2	22
Broward	7	5	4	11	13	40
Calhoun	0	0	0	3	4	7
Charlotte	3	1	0	1	1	6
Citrus	2	0	1	3	1	7
Clay	5	1	6	0	0	12
Collier	0	1	0	1	0	2
Columbia	13	13	4	12	8	50
Dade	53	29	20	17	12	131
DeSoto	13	2	4	2	3	24
Dixie	0	0	3	1	0	4

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 22. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Duval	80	39	50	37	23	229
Escambia	39	26	30	31	30	156
Flagler	0	0	0	0	0	0
Franklin	5	7	1	2	4	19
Gadsden*	30	28	23	19	10	110
Gilchrist	2	3	1	2	2	10
Glades	0	3	2	0	0	5
Gulf	0	1	1	1	0	3
Hamilton	5	2	2	2	1	12
Hardee	3	1	2	2	1	9
Hendry	0	1	0	2	0	3
Hernando	1	5	1	0	1	8
Highlands	7	4	2	2	1	16
Hillsboro	56	44	24	29	26	179
Holmes	3	2	3	1	6	15
Indian River	2	3	3	0	1	9
Jackson	16	12	10	9	12	59
Jefferson	7	5	0	1	3	16
Lafayette	2	3	0	3	2	10
Lake	13	10	6	3	9	41
Lee	5	2	6	5	2	20
Leon	9	9	2	10	7	37
Levy	6	2	3	3	2	16
Liberty	2	0	2	1	4	9
Madison	5	5	11	7	4	32
Manatee	22	8	4	9	7	50
Marion	13	9	15	14	4	55
Martin	0	2	2	0	2	6
Monroe	22	7	3	5	7	44
Nassau	4	5	0	5	3	17
Okaloosa	10	3	4	2	3	22
Okeechobee	1	1	0	0	0	2
Orange	24	17	16	14	10	81
Osceola	2	8	5	4	1	20
Palm Beach	15	17	10	6	6	54
Pasco	4	5	4	3	3	19
Pinellas	19	11	13	9	4	56
Polk	31	28	27	14	15	115
Putnam	12	1	8	5	5	31
St. Johns	17	4	6	6	1	34

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA.

Table No. 22. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
St. Lucie	5	4	0	5	0	14
Santa Rosa	3	1	3	8	5	20
Sarasota	6	2	1	1	0	10
Seminole	14	7	6	5	7	39
Sumter	7	2	2	2	3	16
Swannoe	9	14	7	2	6	38
Taylor	2	3	4	10	7	26
Union	1	1	0	2	2	6
Volusia	10	19	8	7	7	51
Wakulla	3	2	1	0	0	6
Walton	8	5	6	4	1	24
Washington	5	4	3	2	5	19

Table No. 23. DEATHS FROM PULPERIL STATE, BY COUNTIES, FLORIDA.,
1927 - 1931

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
STATE	332	280	255	267	267	1,421
Alachua	6	5	7	7	13	38
Baker	6	2	3	0	4	15
Bay	2	5	1	3	5	16
Bradford	1	6	4	1	0	12
Brevard	5	2	5	2	2	14
Broward	5	7	2	2	5	21
Calhoun	4	4	2	2	4	16
Charlotte	0	1	0	1	0	2
Citrus	0	1	2	0	1	4
Clay	2	0	0	0	0	2
Collier	0	1	0	0	0	1
Columbia	2	4	9	4	4	23
Dade	23	16	16	24	20	99
DeSoto	7	4	5	3	7	26
Dixie	0	4	1	1	1	7
Duval	38	32	35	25	22	152
Escambia	9	7	10	15	13	54
Flagler	0	0	0	0	0	0
Franklin	0	2	0	2	1	5
Gadsden*	8	8	4	5	7	32

*State Hospital Inmates Included.

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA.

Table No. 23. CONTINUED.

COUNTIES	Y E A R S					Total 5 Years
	1927	1928	1929	1930	1931	
Gilchrist	1	1	2	0	2	6
Glades	1	0	0	1	0	2
Gulf	2	0	1	0	0	3
Hamilton	1	2	1	0	1	5
Hardee	0	0	1	0	1	2
Hendry	0	0	2	0	0	2
Hernando	2	0	1	0	0	3
Highlands	0	1	1	1	2	5
Hillsboro	29	15	11	24	16	95
Holmes	4	4	1	2	3	14
Indian River	1	0	3	0	1	5
Jackson	10	10	7	10	7	44
Jefferson	4	3	7	3	3	20
Lafayette	4	0	1	0	2	7
Lake	3	3	7	1	3	17
Lee	7	3	0	2	4	16
Leon	10	3	4	2	3	22
Levy	3	5	2	3	2	15
Liberty	2	3	3	1	1	10
Madison	6	8	6	5	7	32
Manatee	3	3	2	5	3	16
Marion	6	6	1	14	9	36
Martin	0	3	1	0	0	4
Monroe	4	3	1	4	4	16
Nassau	0	1	1	0	1	3
Okaloosa	4	2	1	2	3	12
Okeechobee	2	0	0	0	0	2
Orange	14	7	14	12	10	57
Osceola	3	2	2	0	1	8
Palm Beach	14	13	10	4	7	48
Pasco	7	1	1	3	3	15
Pinellas	10	7	4	7	7	35
Polk	16	17	14	21	12	80
Putnam	11	7	2	3	4	27
St. Johns	10	7	1	3	2	23
St. Lucie	4	0	1	3	4	12
Santa Rosa	3	1	3	2	3	12
Sarasota	2	3	2	2	1	10
Seminole	7	2	6	1	5	21
Sumter	2	1	3	1	0	7

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA.

Table No. 23. CONTINUED.

COUNTIES	YEARS					Total 5 Years
	1927	1928	1929	1930	1931	
Suwannee	5	5	3	6	2	21
Taylor	0	1	2	4	1	8
Union	1	2	0	0	2	5
Volusia	7	5	8	11	9	40
Wakulla	3	3	1	2	2	11
Walton	5	1	5	4	3	18
Washington	1	5	1	1	2	10

Table No. 24. BIRTHS (Exclusive of Stillbirths) AND BIRTH RATES PER 1,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Births	Rates	Births	Rates	Births	Rates
1931	27,033	18.0	18,658	17.5	8,375	18.9
1930	26,991	18.2	18,596	17.8	8,395	19.3
1929	26,853	18.8	18,290	18.2	8,557	20.1
1928	29,776	21.5	20,656	21.3	9,120	22.0
1927	32,061	25.5	23,835	25.7	10,226	25.2
1926	34,721	27.0	24,838	27.9	9,883	25.0
1925	29,301	23.7	20,076	23.6	9,225	23.9
1924	26,748	22.5	18,108	22.3	8,640	23.0
1923	23,221	20.4	15,614	20.2	7,607	20.8

Table No. 25. DEATHS (Exclusive of Stillbirths) AND DEATH RATES PER 1,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	18,101	12.0	11,056	10.4	7,045	15.9
1930	18,215	12.3	11,032	10.6	7,183	16.5
1929	18,155	12.7	10,860	10.8	7,295	17.2
1928	18,932	13.7	11,353	11.7	7,579	18.2
1927	18,143	13.6	10,857	11.7	7,286	18.0
1926	20,029	15.6	12,138	13.6	7,891	20.0
1925	16,832	13.6	10,150	11.9	6,682	17.3
1924	15,797	13.3	9,258	11.4	6,539	17.4
1923	14,074	12.4	8,334	10.8	5,740	15.7

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA.

Table No. 26. INFANT MORTALITY - DEATHS OF INFANTS UNDER ONE YEAR OF AGE AND RATES PER 1,000 LIVE BIRTHS, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	1,737	64	979	52	758	91
1930	1,729	64	928	50	801	95
1929	1,766	66	953	52	813	95
1928	2,000	67	1,123	54	877	96
1927	2,303	68	1,336	56	967	95
1926	2,614	75	1,545	62	1,069	108
1925	2,179	74	1,219	61	960	104
1924	2,182	82	1,259	70	923	107
1923	1,822	78	1,017	65	805	106

Table No. 27. DEATHS FROM TYPHOID FEVER AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	87	5.8	46	4.3	41	9.3
1930	72	4.9	29	2.8	43	9.9
1929	83	5.8	36	3.6	47	11.1
1928	121	8.7	71	7.3	50	12.0
1927	142	10.6	74	8.0	68	16.8
1926	187	14.5	102	11.5	85	21.5
1925	187	15.1	116	13.6	71	18.4
1924	157	13.2	84	10.3	73	19.5
1923	177	15.5	94	12.1	83	22.7

Table No. 28. DEATHS FROM SMALLPOX AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	0	-	0	-	0	-
1930	0	-	0	-	0	-
1929	0	-	0	-	0	-
1928	1	0.1	0	-	1	0.2
1927	12	0.9	3	0.3	9	2.2
1926	7	0.5	2	0.2	5	1.3
1925	0	-	0	-	0	-
1924	0	-	0	-	0	-
1923	0	-	0	-	0	-

CENTRAL BUREAU OF VITAL STATISTICS, FLORIDA

Table No. 29. DEATHS FROM MEASLES AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	36	2.4	30	2.8	6	1.4
1930	61	4.1	43	4.1	18	4.1
1929	13	0.9	11	1.1	2	0.5
1928	20	1.4	15	1.6	5	1.2
1927	21	1.6	15	1.6	6	1.5
1926	24	1.9	19	2.1	5	1.3
1925	8	0.6	6	0.7	2	0.5
1924	214	18.0	144	17.7	70	18.7
1923	74	6.5	48	6.2	26	7.1

Table No. 30. DEATHS FROM SCARLET FEVER AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	7	0.5	7	0.7	0	-
1930	5	0.3	3	0.3	2	0.5
1929	4	0.3	4	0.4	0	-
1928	8	0.6	6	0.6	2	0.5
1927	12	0.9	11	1.2	1	0.2
1926	15	1.2	14	1.6	1	0.3
1925	4	0.3	4	0.5	0	-
1924	2	0.2	2	0.2	0	-
1923	5	0.4	3	0.4	2	0.5

Table No. 31. DEATHS FROM WHOOPING COUGH AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	25	1.7	16	1.5	9	2.0
1930	56	3.8	29	2.8	27	6.2
1929	86	6.0	45	4.5	41	9.6
1928	43	3.1	20	2.1	23	5.5
1927	67	5.0	34	3.7	33	8.1
1926	55	4.3	28	3.1	27	6.8
1925	66	5.3	39	4.6	27	7.0
1924	111	9.3	75	9.2	36	9.6
1923	71	6.2	41	5.3	30	8.2

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Table No. 32. DEATHS FROM DIPHTHERIA AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	74	4.9	61	5.7	13	2.9
1930	79	5.3	57	5.5	22	5.1
1929	67	4.7	52	5.2	15	5.2
1928	69	5.0	52	5.4	17	4.1
1927	93	7.0	84	9.0	9	2.2
1926	123	9.6	102	11.5	21	5.3
1925	105	8.5	91	10.7	14	3.6
1924	99	8.3	73	9.0	26	6.9
1923	86	7.5	70	9.0	16	4.4

Table No. 33. DEATHS FROM INFLUENZA (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	607	40.3	329	30.9	278	62.9
1930	342	23.1	159	15.2	183	42.1
1929	903	63.1	498	49.5	405	95.2
1928	666	48.2	378	39.1	288	69.3
1927	323	24.2	170	18.3	153	37.7
1926	668	52.0	370	41.6	298	75.4
1925	338	27.3	192	22.6	146	37.9
1924	160	13.5	76	9.4	84	22.4
1923	235	20.6	139	18.0	96	26.3

Table No. 34. DEATHS FROM DYSENTERY (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	40	2.7	18	1.7	22	5.0
1930	37	2.5	17	1.6	20	4.6
1929	52	3.6	28	2.8	24	5.6
1928	65	4.7	30	3.1	35	8.4
1927	79	5.9	42	4.5	37	9.1
1926	96	7.5	52	5.8	44	11.1
1925	90	7.3	45	5.3	45	11.7
1924	100	8.4	54	6.6	46	12.3
1923	66	5.8	36	4.7	30	8.2

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Table No. 35. DEATHS FROM EPIDEMIC CEREBROSPINAL MENINGITIS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	10	0.7	9	0.8	1	0.2
1930	5	0.3	2	0.2	3	0.7
1929	11	0.8	9	0.9	2	0.5
1928	8	0.6	7	0.7	1	0.2
1927	7	0.5	5	0.5	2	0.5
1926	6	0.5	5	0.6	1	0.3
1925	2	0.2	1	0.1	1	0.3
1924	17	0.8	8	1.0	2	0.5
1923	24	2.1	19	2.5	5	1.4

Table No. 36. DEATHS FROM RABIES AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	3	0.2	3	0.3	0	-
1930	1	0.1	0	-	1	0.2
1929	2	0.1	2	0.2	0	-
1928	1	0.1	1	0.1	0	-
1927	1	0.1	1	0.1	0	-
1926	2	0.2	2	0.2	0	-
1925	4	0.3	3	0.4	1	0.3
1924	0	-	0	-	0	-
1923	1	0.1	0	-	1	0.3

Table No. 37. DEATHS FROM TETANUS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	60	4.0	26	2.4	34	7.7
1930	53	3.6	15	1.4	38	8.7
1929	58	4.1	25	2.5	33	7.8
1928	61	4.4	20	2.1	41	9.9
1927	80	6.0	29	3.1	51	12.6
1926	97	7.5	33	3.7	64	16.2
1925	90	7.3	29	3.4	61	15.8
1924	68	5.7	24	3.0	44	11.7
1923	61	5.4	20	2.6	41	11.2

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Table No. 38. DEATHS FROM TUBERCULOSIS (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	1,067	70.8	427	40.1	640	144.8
1930	1,015	68.6	432	41.3	583	134.0
1929	1,014	70.8	416	41.3	598	140.6
1928	1,102	79.7	481	49.7	621	149.5
1927	1,097	82.2	463	49.8	634	156.4
1926	1,187	92.3	519	58.3	668	169.0
1925	999	80.8	426	50.0	573	148.7
1924	1,064	88.7	457	56.2	597	159.1
1923	1,079	94.7	490	63.3	589	161.2

Table No. 39. DEATHS FROM SYPHILIS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	458	30.4	108	10.2	350	79.2
1930	424	28.6	101	9.7	323	74.3
1929	374	26.1	76	7.6	298	70.1
1928	438	31.7	89	9.2	349	84.0
1927	367	27.5	93	10.0	274	67.6
1926	334	26.0	77	8.7	257	65.0
1925	235	19.0	72	8.5	163	42.3
1924	190	16.0	37	4.6	153	40.8
1923	179	15.7	37	4.8	142	38.9

Table No. 40. DEATHS FROM MALARIA AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	205	13.6	109	10.2	96	21.7
1930	332	22.4	182	17.4	150	34.5
1929	470	32.8	259	25.7	211	49.6
1928	388	28.1	224	23.2	164	39.5
1927	208	15.6	92	9.9	116	28.6
1926	223	17.3	98	11.0	125	31.6
1925	209	16.9	112	13.2	97	25.2
1924	249	21.0	123	15.1	126	33.6
1923	293	23.7	161	20.8	132	36.1

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Table No. 41. DEATHS FROM CANCER (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	1,072	71.2	887	83.4	185	41.9
1930	1,032	69.7	834	79.8	198	45.5
1929	994	69.4	805	80.0	189	44.4
1928	887	64.1	705	72.9	182	43.8
1927	949	71.1	757	81.5	192	47.4
1926	878	68.3	723	81.2	155	39.2
1925	776	62.8	624	73.3	152	39.4
1924	700	58.9	560	68.9	140	37.3
1923	642	56.4	500	64.6	142	38.9

Table No. 42. DEATHS FROM DIABETES MELLITUS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	216	14.3	170	16.0	46	10.4
1930	203	13.7	167	16.0	36	8.3
1929	188	13.1	146	14.5	42	9.9
1928	190	13.7	147	15.2	43	10.4
1927	172	12.9	132	14.2	40	9.9
1926	184	14.3	145	16.3	39	9.9
1925	141	11.4	115	13.5	26	6.7
1924	96	8.1	77	9.5	19	5.1
1923	97	8.5	74	9.6	23	6.3

Table No. 43. DEATHS FROM PELLAGRA AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	220	14.6	66	6.2	154	34.8
1930	238	16.1	85	8.1	153	35.2
1929	313	21.9	104	10.3	209	49.1
1928	290	21.0	93	9.6	197	47.4
1927	220	16.5	104	11.2	116	28.6
1926	130	10.1	48	5.4	82	20.7
1925	125	10.1	45	5.3	80	20.8
1924	100	8.4	43	5.3	57	15.2
1923	91	8.0	34	4.4	57	15.6

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Table No. 44. DEATHS FROM CEREBRAL HEMORRHAGE AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	1,304	86.6	784	73.7	520	117.6
1930	1,334	90.1	784	75.0	550	126.4
1929	1,248	87.2	764	75.9	484	113.8
1928	1,146	82.9	717	74.1	429	103.3
1927	1,113	83.4	692	74.5	421	103.9
1926	1,130	87.9	714	80.2	416	105.2
1925	1,027	83.0	675	79.3	352	91.4
1924	1,024	86.2	694	85.4	330	87.9
1923	832	73.0	544	70.3	288	78.8

Table No. 45. DEATHS FROM HEART DISEASE (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	2,810	186.6	1,998	187.8	812	183.7
1930	2,789	188.4	1,915	183.3	874	200.9
1929	2,502	174.8	1,727	171.6	775	182.2
1928	2,482	179.5	1,744	180.2	738	177.7
1927	2,290	171.6	1,590	171.2	700	172.7
1926	2,251	175.1	1,572	176.6	679	171.8
1925	2,240	181.1	1,589	186.7	651	169.0
1924	2,111	177.7	1,419	174.6	692	184.4
1923	1,761	154.6	1,214	156.9	547	149.7

Table No. 46. DEATHS FROM PNEUMONIA (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	863	57.3	508	47.7	355	80.3
1930	902	60.9	537	51.4	365	83.9
1929	868	60.6	505	50.2	363	85.3
1928	1,087	78.6	647	66.9	440	105.9
1927	916	68.7	528	56.8	388	95.7
1926	1,202	93.5	656	73.7	546	138.1
1925	988	79.9	526	61.8	462	119.9
1924	894	75.3	511	62.9	383	102.0
1923	815	71.5	470	60.7	345	94.4

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Table No. 47. DEATHS FROM PLEURISY AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	39	2.6	24	2.3	15	3.4
1930	30	2.0	20	1.9	10	2.3
1929	30	2.1	22	2.2	8	1.9
1928	34	2.5	20	2.1	14	3.4
1927	34	2.5	22	2.4	12	3.0
1926	32	2.5	19	2.1	13	3.3
1925	31	2.5	18	2.1	13	3.4
1924	27	2.3	17	2.1	10	2.7
1923	24	2.1	12	1.6	12	3.3

Table No. 48. DEATHS FROM ASTHMA AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	42	2.8	23	2.2	19	4.3
1930	57	3.9	37	3.5	20	4.6
1929	44	3.1	27	2.7	17	4.0
1928	48	3.5	28	2.9	20	4.8
1927	60	4.5	37	4.0	23	5.7
1926	37	2.9	26	2.9	11	2.8
1925	43	3.5	23	2.7	20	5.2
1924	63	5.3	40	4.9	23	6.1
1923	40	3.5	27	3.5	13	3.6

Table No. 49. DEATHS FROM DIARRHEA AND ENTERITIS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	292	19.4	166	15.6	126	28.5
1930	359	24.3	192	18.4	167	38.4
1929	355	24.8	208	20.7	147	34.6
1928	437	31.6	247	25.5	190	45.7
1927	633	47.4	373	40.2	260	64.1
1926	682	53.1	434	48.8	248	62.7
1925	620	50.1	379	44.5	241	62.5
1924	646	54.4	390	48.0	256	68.2
1923	556	48.8	386	49.9	170	46.5

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Table No. 50. DEATHS FROM APPENDICITIS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	220	14.6	165	15.5	55	12.4
1930	193	13.0	116	11.1	77	17.7
1929	188	13.1	130	12.9	58	13.6
1928	208	15.0	130	13.4	78	18.8
1927	217	16.3	142	15.3	75	18.5
1926	231	18.0	160	18.0	71	18.0
1925	183	14.8	121	14.2	62	16.1
1924	149	12.5	103	12.7	46	12.3
1923	129	11.3	84	10.9	45	12.3

Table No. 51. DEATHS FROM NEPHRITIS (All Forms) AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	1,737	115.3	1,095	102.9	642	145.2
1930	1,818	122.8	1,183	113.2	635	146.0
1929	1,690	118.0	1,027	102.1	663	155.9
1928	1,772	128.1	1,132	117.0	640	154.1
1927	1,615	121.1	1,016	109.4	599	147.8
1926	1,709	133.0	1,089	122.4	620	156.8
1925	1,285	103.9	798	93.7	487	126.4
1924	1,029	86.6	623	76.7	406	108.2
1923	1,002	88.0	600	77.5	402	110.0

Table No. 52. DEATHS FROM CONGENITAL MALFORMATIONS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	129	8.6	105	9.9	24	5.4
1930	123	8.3	101	9.7	22	5.1
1929	113	7.9	91	9.0	22	5.2
1928	110	8.0	94	9.7	16	3.9
1927	138	10.3	116	12.5	22	5.4
1926	148	11.5	127	14.3	21	5.3
1925	106	8.6	88	10.3	18	4.7
1924	84	7.1	67	8.2	17	4.5
1923	76	6.7	59	7.6	17	4.7

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Table No. 53. DEATHS FROM DISEASES OF EARLY INFANCY AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	806	53.5	515	48.4	291	65.8
1930	791	53.4	470	45.0	321	73.8
1929	820	57.3	500	49.7	320	75.2
1928	853	61.7	543	56.1	310	74.6
1927	935	71.6	624	67.2	331	81.7
1926	1,049	81.6	671	75.4	378	95.6
1925	885	71.6	563	66.1	322	83.6
1924	819	68.9	537	66.1	282	75.1
1923	654	57.4	427	55.2	227	62.1

Table No. 54. DEATHS FROM SUICIDE AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	215	14.3	197	18.5	18	4.1
1930	200	13.5	190	18.2	10	2.3
1929	180	12.6	169	16.8	11	2.6
1928	157	11.4	141	14.6	16	3.9
1927	211	15.8	199	21.4	12	3.0
1926	177	13.8	164	18.4	13	3.3
1925	132	10.7	123	14.4	9	2.3
1924	105	8.8	94	11.6	11	2.9
1923	83	7.3	79	10.2	4	1.1

Table No. 55. DEATHS FROM HOMICIDE AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	453	30.1	156	14.7	297	67.2
1930	362	24.5	119	11.4	243	55.9
1929	338	27.1	122	12.1	266	62.5
1928	368	26.6	122	12.6	246	59.2
1927	480	36.0	131	14.1	349	86.1
1926	643	50.0	176	19.8	467	118.1
1925	444	35.9	124	14.6	320	83.0
1924	354	29.8	103	12.7	251	66.9
1923	313	27.5	79	10.2	236	64.6

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Table No. 56. DEATHS FROM AUTOMOBILE ACCIDENTS AND RATES PER 100,000 POPULATION, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	514	34.1	395	37.1	119	26.9
1930	564	38.1	430	41.1	134	30.8
1929	496	34.6	392	39.0	104	24.5
1928	397	28.7	295	30.5	102	24.6
1927	427	32.0	323	34.8	104	25.7
1926	512	39.8	396	44.5	116	29.3
1925	454	36.7	346	40.6	108	28.0
1924	243	20.5	168	20.7	75	20.0
1923	178	15.6	137	17.7	41	11.2

Table No. 57. ILLEGITIMATE BIRTHS, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL	WHITE	COLORED
1931	1,651	288	1,363
1930	1,467	277	1,190
1929	1,484	269	1,215
1928	1,534	333	1,201
1927	1,574	356	1,218
1926	1,414	330	1,084
1925	1,301	280	1,021
1924	1,182	238	944
1923	1,096	198	898

Table No. 58. STILLBIRTHS, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL	WHITE	COLORED
1931	1,525	690	835
1930	1,754	746	1,008
1929	1,705	731	974
1928	2,013	890	1,123
1927	2,274	1,015	1,259
1926	2,299	1,102	1,197
1925	2,036	913	1,123
1924	1,868	821	1,047
1923	1,514	659	855

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Table No. 59. DEATHS FROM PUERPERAL STATE AND RATES PER 1,000
LIVE BIRTHS, BY COLOR, FLORIDA, 1923 - 1931

YEARS	TOTAL		WHITE		COLORED	
	Deaths	Rates	Deaths	Rates	Deaths	Rates
1931	267	9.9	142	7.6	125	14.9
1930	267	9.9	155	8.3	112	13.3
1929	255	9.5	144	7.9	111	13.0
1928	280	9.4	175	8.5	105	11.5
1927	352	10.3	202	8.5	150	14.7
1926	357	10.3	214	8.6	143	14.5
1925	330	11.3	186	9.3	144	15.6
1924	284	10.6	138	7.6	146	16.9
1923	287	12.4	164	10.5	123	16.2

CONCLUSION

The foregoing report of the Central Bureau of Vital Statistics is not to be considered by any means complete as an effort to cover a decade necessarily prohibits a volume of detail requisite to a complete report. It contains, however, some basic facts and samples of information which may be obtained in more complete form if desired.

The last complete report published by this Bureau was for 1922. Statistical data have been tabulated and are on record, complete since that year, and available on request. Statewide tabulations in this department begin with the calendar year 1917. The United States Bureau of the Census has in its published reports, Florida's tabulations beginning with 1919 for deaths and beginning with the year 1924 for births.

Ola Lewis, Assistant Director, Nettie Leland, Chief Clerk, and Anna Emmons, Registration Inspector, together with the other employees in this Bureau are especially commended for their efficient services which have been an important factor in attracting national recognition for Florida's records.

Respectfully submitted,

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Director.